1958



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COUNTY BOROUGH OF GATESHEAD

ANNUAL REPORT

OF THE

Public Health Department

FOR YEAR 1958

JAMES GRANT, M.D., Ch.B., D.P.H. (GLASGOW)

MEDICAL OFFICER OF HEALTH

J. P. LAVENDER, CHIEF PUBLIC HEALTH INSPECTOR



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HEALTH COMMITTEE

as at 31st December, 1958

Chairman: Alderman P. S. Hancock, O.B.E. Vice-Chairman: Alderman J. T. Etherington

THE MAYOR, ALDERMAN J. W. ROBERTS	Coun.	W. HARLAND
ALD. W. F. BARRON	,,	Mrs. A. Hutchison
,, A. Crossley	,,	Mrs. A. E. Jewitt
" M. Grant	,,	Mrs. J. M. E. Joyce
" Mrs. E. A. Hardy	,,	Mrs. J. H. Lister
" J. Hutchison	,,	MRS. E. C. A. LUMSDEN
" W. J. Pike	,,	J. W. Morris
" B. N. Young	,,	S. Mosley
COUN. R. N. BAPTIST	,,	C. Reed
" Mrs. M. Bell	,,	C. Ryans
,, J. W. Brown	,,	D. W. STOKOE
,, W. Collins	,,	S. J. Wheatley
" J. Fitzpatrick	,,	G. W. WILDE
,, M. Hammell		F. C. E. Wood

Representatives of Outside Bodies

DR. J. C. ARTHUR MR. C. G. C. SIMMONS

CLID COLAR AUTTEEC

SUB-COMMITTEES Maternity and Child Welfare

THE CHAIRMAN	Coun. Mrs. M. Bell
THE VICE-CHAIRMAN	" W. HARLAND
ALD. Mrs. E. A. HARDY	,, Mrs. A. Hutchison
" J. A. HUTCHISON	" Mrs. A. E. Jewitt
,, B. N. YOUNG	., Mrs. J. M. E. Joyce

Co-opted Members

MRS. H. JONES MRS. L. PATTISON
MRS. L. M. MORRIS MRS. H. M. STOREY

Mrs. M. Winnard

Invalid Care and After-Care

THE CHAIRMAN	ALD. J. HUTCHISON
THE VICE-CHAIRMAN	COUN. MRS. M. BELL
ALD. W. F. BARRON	,, W. HARLAND
" A. Crossley	,, Mrs. A. Hutchison
" Mrs. E. A. Hardy	,, Mrs. A. E. Jewitt

Representative of the Council of Social Service (VACANCY)

Other Members Miss H. Brotherton (VACANCY)

Mental Weifare

The Chairman	ALD. J. HUTCHISON
The Vice-Chairman	"B. N. Young
ALD. W. F. BARRON	COUN. MRS. M. BELL
,, A. Crossley	" W. HARLAND
,, Mrs. E. A. Hardy	, Mrs. A. Hutchison
Cou	n. Mrs. A. E. Jewitt

General Purnoses and Insanitary Property

General Purposes and	Insanitary Property
THE CHAIRMAN	ALD. B. N. YOUNG
THE VICE-CHAIRMAN	Coun. Mrs. M. Bell
ALD. W. F. BARRON	" J. W. Brown
,, A. Crossley	" -W. HARLAND
"Mrs. E. A. Hardy	,, Mrs. A. HUTCEISON
" J. Hutchison	" Mrs. A. E. Jewitt

COUN. C. RYANS

1. STAFF OF LOCAL AUTHORITY

- *Medical Officer of Health, Principal School Medical Officer and Medical Superintendent, Sheriff Hill Infectious Diseases Hospital—James Grant, M.D, Ch.B., D.P.H.
- Deputy Medical Officer of Health and Senior School Medical Officer—Margaret B. Herbst, M.D., B.S., B.HY., D.P.H., (retired on 17.3.58).. Jean M. Bainbridge, M.B. B.S., D.R.C.O.G., D.P.H. (appointed 18.3.58).
- Assistant Medical Officers of Health and School Medical Officers—Jean M. Bainbridge, M.B., B.S., D.R.C.O.G. (to 17.3.58,) Edwin I. Blenkinsop, M.B., B.S., D.P.H. (resigned 21.10.58), Mary J. Mossman, M.B., B.S., D.R.C.O.G., Millicent W. Payne, M.B., B.S., D.P.H. (commenced 1.4.58), Terence W. L. Knaggs, M.B., B.S., D.P.H. (commenced 1.8.58).
- Chief Dental Officer—Joseph Whitehouse, L.D.S.
- Dental Officers—Miss Teresa M. Rossi, B.D.S., Henry D. Norris, B.D.S., Mrs. I. F. Jones, L.D.S., Bhopinder S. Naru, L.D.S. (Temporary, Part-time).
- Dental Attendants—Miss M. Cessford, Miss E. E. Grass (terminated 8.10.58), Miss S. P. Thompson, Mrs. E. Danby, Miss P. A. Bagnall (resigned 24.6.58), Miss P. Smith (resigned 14.8.58), Miss E. I. Carter (appointed 21.7.58), Mrs. H. Tyrrell (appointed 1.9.58).
- Dental Technicians—T. W. Curtis, J. GILHOLME.
- Orthoptist—Miss J. F. Maughan, D.B.O. (resigned 30.6.58), Miss E. P. Rudd, D.B.O. (commenced 15.9.58).
- Physiotherapist (part-time)—Mrs. J. M. PICKARD, M.C.S.P., O.H.C., H.T. (commenced 13.10.58).
- Health Visitors and School Nurses—C. Robson (Supt.), I. Bradley, M. Daglish, D. C. Johnson, E. Wise, M. Craggs, E. Powley, J. Turnbull, S. W. Atkinson, A. Mullen, R. Gardner, S. Gilley, N. M. Bell, E. Baxter, M. Fairs, P. L. Trotter (resigned 31.3.58), J. J. Duncan (resigned 9.8.58), M. McManemy, M. M. Cunningham (commenced 1.11.58), M. B. Main (from 29.6.58).
- Student Health Visitors—M. Morrell, L. Thorne, D. E. Tulley (commenced training September, 1958).
- Nursing Assistants—M. Coates, W. Craig, P. M. Jackson.
- Tuberculosis Nurses—E. Fry, J. Heatley.
- Non-Medical Supervisor of Midwives—M. BOLAM.
- Municipal Midwives—D. E. Bell, E. Bendin (retired 7.11.58), A. Faldon (retired 7.8.58), S. Poole, S. Stewart (retired 31.10.58), M. Dobson, B. Menhams, E. Torrington, A. W. Havery, J. Taylor.
- Matrons of Day Nurseries—L. Donnelly, I. Jackson,
- Supervisor of Domestic Helps—Mrs. S. Maitland. Assistant Supervisor—Mrs. J. McDonagh.
- Duly Authorised Officers (Mental Welfare)—C. MITCHELL, MISS A. OGDEN, L. M. GRAY.
- Occupation Centre—Supervisor—MISS M. N. McDermott.
- Assistant Supervisors—Mrs. M. E. D. Moore, Mrs. M. Stewart, Mrs. M. Taylor.
- Clerical Staff—N. Craig, R. A. Sutton, A. Baldock, Miss P. Neilson, Miss E. Jones, Miss M. Atkinson, Mrs. M. Watson, Mrs. A. Smith, Miss N. Scott, Mrs. H. Scott, R. W. E. Bratton, Mr. S. Renforth, Mr. S. Marchant, Miss M. H. Jobes, Mrs. D. Bertram, Miss E. Gilhespie, Mr. P. O'Donnell (Temporary—commenced 24.3.58).

Welfare Food Distributors-Mrs. J. Noble, Miss E. A. Hunter, Mrs. E. L. Hurst.

Ambulance Officer—J. W. NESBIT.

Deputy Ambulance Officer—H. D. FLETCHER.

Caretaker, Health Centre-W. A. ROBB.

*Continuing to serve part-time the Local Hospital Service.

2. STAFF OF PUBLIC HEALTH INSPECTOR'S DEPARTMENT

- Chief Public Health Inspector and Chief Inspector for the Diseases of Animals Acts— J. P. Lavender*†
- Deputy Chief Public Health Inspector and Senior Food and Drugs Inspector—G. CHARLTON*†
- Senior Public Health Inspectors—G. T. Neilson*† (Housing Inspector), J. Higgins*† (Factories Inspector), T. J. Westgarth*†.
- District Public Health Inspectors—E. Soady*, resigned 10.5.58, E. McGarr*, appointed 21.4.58.
 - Six vacancies unfilled during the year. *—Public Health Inspector's Certificate.
 - †—Meat and Food Inspector's Certificate.
- Public Analyst—W. GORDON CAREY, F.I.C.
- Clerical Staff—H. GIBSON (died 5.2.58), M. GRAY, MRS. E. SUTTON, J. DOUGLAS, (appointed 1.4.58.)
- Rodent Operators-I. RUTTER (Senior), J. BAINBRIDGE, B. COCKBURN.
- Disinfestor—J. FREEMAN.

3. STAFF SHARED BY THE LOCAL AUTHORITY AND THE REGIONAL HOSPITAL BOARD

- Clinical Tuberculosis Officer (Chest Physician) and Medical Superintendent, Whinney House Hospital—S. D. Rowlands, M.D., B.S., B.HY., D.P.H.
- Chest Physicians—E. L. Feinmann, M.B., Ch.B., M.R.C.P.
- Assistant Chest Physician—K. M. MARTISCHNIG, M.D., M.B., B.S.

4. HOSPITAL STAFF GIVING SERVICE AT LOCAL AUTHORITY CLINICS

- Ophthalmic Surgeons—H. V. INGRAM, M.B., B.S., D.O.M.S., M.R.C.S., L.R.C.P., J. S. ARKIE, F.R.C.S.
- Orthopaedic Surgeon—A. E. Bremner, M.B., Ch.B., F.R.C.S.
- Remedial Gymnast—T. MIDGLEY, M.S.R.G.
- Clerks (Chest Clinc)—B. ARMATAGE, MISS W. O'KANE.

To the Mayor, Aldermen and Councillors of the County Borough of Gateshead

"We humbly beg to report that the town of Gateshead, separated from that of Newcastle by the River Tyne only, is mainly situated on a steep slope ascending from that river, in some places with great abruptness, and at the southern extremity of the Borough reaching a height of 500 feet; that the great bulk of the town lies at a very considerable elevation affording remarkable facilities for sewerage, ventilation, etc., that except in respect of the clayey nature of the surface soil, we know of nothing at all unfavourable in its natural position or circumstances and see no reason whatever why Gateshead should not be a very healthy town."

In presenting to you the annual report on the public health of Gateshead, I thought it suitable to include the above quotation written. in 1854 and surprisingly to be found in the report of the commissioners: appointed by Parliament to enquire into the outbreak of cholera in. Newcastle and Gateshead in 1853. The cholera commissioners were: Joseph Burnely Hume, John Simon and John Frederick Bateman, of whom Simon went on to be one of the great pioneers of public health. So far as health is concerned, the history of the Borough since these words: were written did not at all fulfill the optimistic appraisal of the area by the commissioners, because of the extraordinary mushroom-like growth of the northern parts of the town in which overcrowding and insanitation became everywhere rampant. It is only in the years after the second! world war that the vital statistics of Gateshead have really become: satisfactory and fit to be compared with those of other towns in England... Yet withal, the opinion of the commissioners cannot be disputed as to its correctness.

While the death rate seems now to have reached a stabilised level and mortality from infectious diseases and tuberculosis has so markedly diminished, the infantile mortality rate, an accurate index of the factors bearing on the public health, still remains somewhat worse than the national average, and indeed lags behind some of the adjoining areas. It is not, however, the infections that are responsible for this mortality, but rather the frequency of premature birth with the resultant early deaths of the immature infants. Why premature births should happen is an unsolved mystery, for our enquiries have not correlated prematurity with any factor of a preventable nature such as the continuation of the pregnant woman at work. Clearly, some study must be made to try and elucidate the factors concerned in the problem presented by a considerable infantile mortality during the first few weeks of life.

Many of the older citizens must take pride in the changed aspect of a their town when viewed from the north. Gateshead enjoys considerable advantages in being elevated, as the cholera commissioners pointed out, and one of these is that it could dominate the middle reaches of the Tynee Valley. The erection, therefore, of the multi-storey flats is not only in keeping with modern ideas but it actually provides a new sky-line, so that remarks descriptive of the "dirty lane leading to Newcastle" are not longer applicable. The town is making rapid progress also in clearings unhealthy housing areas in the riverside districts, and there is in process a general replanning of the lay-out of the town., which may, one hopes

bring Gateshead well within the ambit of the business and commercial nucleus of the northern region.

The movement of population from the town is unfortunately that of the young and the middle-aged with their families into adjoining areas, which grow in population as Gateshead declines. Perhaps one need not be too depressed at the prospect, for ultimately there is bound to be some linking up of these areas which have so much of common interest and are quite remote from the county town some fourteen miles away.

The failure to unify the southern areas of Tyneside must be uneconomic and wasteful in its effect, as the major authorities concerned proceed with their separate schemes. Indeed, it was perhaps of great benefit to Felling and Whickham that the Gateshead municipal hospitals were there to be nationalised to serve the needs of these areas as well as the needs of the people of Gateshead.

It is in this field that close attention should be paid to current developments. The National Health Service Act clearly laid on the newly constituted regional hospital boards, and hospital management committees the duty of providing the specialist and hospital services. of mental health, the local authority handed over to the regional hospital board their large mental hospital, which was a bigger institution than was required for the needs of Gateshead and which served other areas. The local authority also handed over the chronic hospital together with accommodation for some of the cases of mental illness and mental deficiency. It appears that legislation in prospect, following the guidance of the Royal Commission on Mental Illness and Deficiency, is proposing to turn the clock back in the matter of accommodation for the mentally ill and the mentally defective by insisting that local authorities should again provide accommodation for these unfortunate individuals at the expense of the rates, and without any parallel financial help from the national exchequer.

This local authority has fared rather badly in the local hospital provision for the chronic sick, shouldering some of the burden of chronic sickness which should properly have been treated in geriatric hospital wards. In spite of representations, no great revision of this problem seems to be in sight. It is the opinion of most people that when Gateshead owned its own hospitals the services then were much more available than they are today. There seems to be little doubt then that the local authority will be very critical in the matter of redeveloping hostel schemes within its area.

The proposed revolution in the field of mental health marks yet another stage in the process by which the modern generation is prepared to throw overboard systems of administration which have gradually evolved over the years. The tendency of most reform movements is to overshoot the mark and many people engaged in the field of social medicine have reason to regret the complete abolition of the Poor Law system, which in the relatively humanitarian form of its last days did provide for those who were definitely in need of assistance and also made

it hard for those who sought to evade their responsibilities and pass them to the local authority or the state. It seems also that in the field of mental illness and deficiency, the lunacy laws which have taken one hundred years to crystalise and the Act of 1913 dealing with mental deficiency have to be scrapped in favour of a new measure which makes sudden and far reaching changes in the legal sanctions applicable to these unfortunate people. The old laws were designed to protect the unfortunate mentally disturbed persons from victimisation by the sane and at the same time to protect the sane from the mentally disturbed or defective. Except in one or two instances these legal measures seem to have worked well in the past so that those who are experienced will be very critical and cautious in their approach to the new mental health acts.

In the present report it is necessary to express our best wishes to Dr. Margaret Herbst, who retired in March, 1958. During her long service she became exceedingly well known to the mothers of Gateshead by her work in beginning and pushing the provision of ante-natal care shortly after the first Great War. During her service she fostered, officially and unofficially, the whole child welfare movement in the town, which has every reason to be grateful to her. In her well deserved retirement Dr. Herbst has the best wishes of the councillors, her former colleagues of this department and of the general public. To succeed Dr. Herbst, the council promoted Dr. Jean Bainbridge, who comes to the post with a long and special hospital experience of the problems of obstetrics and gynaecology. She has already shown her enthusiasm and industry and in fact actually makes her contribution to this report in the appropriate sections dealing with maternity and child welfare.

The dental services, under Mr. Whitehouse, have been afflicted by the usual shortage of staff, but nevertheless have coped manfully with the work done for the children of school age and under and for the expectant mothers of the town. In the sanitary department things were far from healthy during 1958, due to the great shortage of trained inspectors. This problem is not limited to Gateshead and some authorities have offered rather attractive conditions in the effort to secure the necessary staff. Gateshead apparently has the loyalty of its senior inspectors and with a generous approach to the problem by the council it is hoped once again to build up the staff to the full number required to maintain a most essential service. The work of securing the end of insanitary housing is among the most valuable fields of local authority work, and it would be a great pity if this were impeded purely for lack of manpower. Nevertheless under the leadership of Mr. Lavender, the work of a very strenuous year has been successfully carried through. The health visiting staff will probably be brought up to strength in 1959 by the addition of newly trained health visitors.

A new gap in the personnel of this department has arisen in the midwifery service, which was considerably under strength at the end of the year. This position has arisen from the retirement of several midwives who were first engaged under the Midwives' Act of 1936 and who were already living in the town. To build up the staff it is necessary now to provide housing accommodation for midwives, and the housing committee has shown itself willing to make provision of this kind.

Concluding this preface, I must express my thanks for the continued support which the staff received from the council and particularly its health committee, the Chairman and Vice-Chairman of which have now for many years presided over the administrative policy of the health service. To all the members of the staff of the department, clerical and professional, I would like to express my thanks for their loyalty and industry in a most difficult year.

Your obedient Servant,

JAMES GRANT,

Medical Officer of Health.

PART I

NATURAL AND SOCIAL CONDITIONS OF THE BOROUGH

General Remarks

The process of the gradual improvement in the lay-out of the northern area of the Borough has continued. This has been achieved through the deliberate planning of improvements and also through the convenient clearance of large areas of slums. In particular, the very large Chandless Slum Clearance Area is fitting in with the construction of the Sunderland Road By-pass, a road which will it seems adjoin the areas of new housing development on which further blocks of flats and perhaps three or four storey terraces and other patterns of house will be erected. At the end of the year there were three groups of multi-storey flats, the original block of four in the Barn Close Area, a subsequent block of three in the Priory Court Flats and a third very large single block named the Regent Court Flats, situated between the High Street and High West Street on the site of Ann Street. The Ellison Street Clearance Area became the subject of a compulsory purchase order, and although not approved at the end of the year may be a great benefit in affording access to the land between High Street and the West Street in the northern part of the town.

The replanning of this area of the town would seem to afford opportunities for making proper and adequate provision for the parking of motor vehicles, and this may have the secondary effect of tempting commercial and shopping interests to establish themselves in Gateshead rather than in the congested centre of Newcastle where the traffic problem appears to be insoluble.

The vital statistics show a further slight decline in the population. in spite of a large natural increase. The reason for this is the overspill of population from the Borough into the Felling Urban area as the Felling; housing developments absorb the families displaced from the slum clearance areas of Gateshead. In 1958, there were 186 families rehoused! in the Felling area making an estimated population of 850 so transferred It is understood that ultimately the developments in Felling by the: Gateshead authority, Felling authority and the North Eastern Housing: Association will provide some 1,100 houses, of which some 675 are: already erected or in course of construction. The problem of Local Government as at present constituted with its peculiar anomalies, has led to the establishment of a Boundary Commission to enquire and recommend the changes that would appear to be necessary to produce efficiency and economy. Although the Tyneside area had a Royal Commission of Enquiry in 1936, the recommendations of that Commission were notific acceptable to the fourteen local authorities concerned with the Tyneside: area. It appears, however, that the boundary commissioners will make: their investigations and reports with respect to the south midland areas first, and that the Tyneside area will be reserved to a later date.

Clearly something should emerge to unite the authorities on the south side of the Tyne, where Gateshead is continuous in its developments.

with Felling, with Washington, with Chester-le-Street Rural and with Whickham Urban Council areas. The present arrangement must be wasteful and inefficient, particularly in regard to the provision of many public services.

The great local problem continues to be the care of the aged and infirm, for whom both hospital and hostel accommodation is lacking. One other class of person that gives concern is the person of subnormal mentality, for whom legislation proposes to place additional responsibilities on the local authorities.

Accidents

The police return of road traffic accidents in 1958 showed an increased total of 317, as compared with 305 in 1957. These involved the death of 13 persons, serious injury to 55 and 292 persons slightly injured. The persons killed included 2 motor cyclists, 2 pedal cyclists over 15 years, and 9 pedestrians. Serious injuries were inflicted on 31 pedestrians, 3 motor cyclists, 1 pillion passenger, 4 pedal cyclists, 4 motor drivers and 7 other persons. This record of mortality is, as everyone knows, a reflex of narrow and congested roads coupled with reckless, dangerous or careless driving of vehicles.

It is possible also to analyse the emergency calls attended by the Gateshead Municipal Ambulance Service in 1958. This shows that 1,220 persons were removed to hospital. Of these 548 were accidentally injured and 216 were taken ill in the street, a total of 764. 159 persons were injured at home and 46 suddenly taken ill, a total of 205. 214 persons were injured at work and 37 were taken ill at work, a total of 251.

On further classification of these ambulance calls it appears that 25 persons were burned at home, 6 at work and one in the street. Cuts and wounds were sustained by 77 persons in the home, 308 in the street and 96 at work. Fractures were sustained by 21 persons in the home, 77 in the street and 28 at work. Emergency illnesses in the home numbered 46, in the street 216 and at work 37. Other emergencies numbered 36 in the home, 162 in the street and 84 at work. Altogether, these calls related to 812 males and 408 females. In addition, 33 calls related to patients who were transported to hospital and certified dead on arrival, in most cases after a sudden collapse in the street or at home, but included among the figures were two suicides and 6 deaths from street accidents, these last being in children under the age of one.

Among the death returns of 1958, accidental deaths of borough residents numbered 50, of which 19 were due to motor accidents involving 14 males with ages ranging from 6 to 73, and 5 females whose ages ranged from 5 to 80. 12 of the above deaths were pedestrians, one was riding a pedal cycle and six riding motor vehicles. The other 31 accidental deaths (18 males and 13 females), were the result of falls at home involving 2 males and 7 females and falls outside the home involving 3 males, together with 2 burns and scalds (both male), 5 deaths from asphyxia (3 male and 2 female), 4 from coal gas and carbon monoxide poisoning (3 males and 1 female), 2 from an overdose of Aspirin, 2 from electro-

METEOROLOGICAL REPORT FOR THE YEAR 1958

		T	Temperature (Deg. Fahr.) in Shade	Deg. Fahr.)	in Shade	Rainfall	fall	Sunshine (hours	e (hours)	Mean		
Month	Highest Max	Mean Max	Lowest Min	Mean Min	Меан	Total in inches	Dry Days	Total hours	Max hours	humidity	Ground frosts	Days of snow
January	50	4	18	31.7	36.4	1.32	17	75.	9.2	87.9	15	9
February	53	42.1	22	32.3	37.2	3.38	6	62.7	8.6	86.7	15	9/
March	52	40.1	19	31.9	36.	3.08	14	89.7	7.4	88.3	17	12
April	63	50.	27	38.2	44.1	1.73	19	134.3		71.	7	7
May	71	55.4	36	42.5	48.9	3.51	13	148.6	12.8	74.3	2	
June	72	59.4	43	47.5	53.5	2.69	14	126.6	12.2	79.9		
July	74	64.4	44	51.9	58.1	4.81	12	163.3	12.6	80.9		
August	73	65.4	47	53.1	59.2	2.38	13	144.4	10.7	7.67		
September	69	62.6	43	51.0	56.8	1.48	16	125.1	9.5	84.6		
October	62	55.1	39	45.0	50.0	1.22	18	118.9	9.5	82.		
November	99	47.2	32	38.7	42.9	.56	21	55.0	8.1	88.7	2	
December	55	38.5	32	36.1	37.3	3.86	13	37.8	5.2	90.3	9	
	74	51.8	18	41.7	46.7	30.02	179	1281.4	12.8	82.8	65	30
	8th July		22nd Jan.						3rd May			
									,			

Wind Directions—N. 37, N.E. 24, E. 17, S.E. 42, S. 46, S.W. 69, W. 50, N.W. 76

cution at work and one from being crushed at work. There were also 3 deaths (1 male and 2 female), from drowning.

The figures which have just been quoted show that there is a large incubus of mortality and morbidity resulting from events which are foreseeable and preventable. They reinforce the necessity for the educational campaign which was held in November under the sponsorship of the Minister of Health and the Minister of the associated government departments. As mentioned elsewhere, the Local Authority brought out a 'Prevention of Accidents' Handbook, which was circulated as far as possible to interested householders in the borough free of charge.

Climatic Conditions

Since the meteorological station opened in 1952, there are now available the meteorological data for the last six years in respect of the observations at Sheriff Hill Hospital by the Hospital Engineer, Mr. R. H. Chesney, who has very kindly acted as observer on behalf of the Local Authority.

METEOROLOGICAL STATION — SHERIFF HILL HOSPITAL

Summary of Climatological Conditions 1952-1958

Mean daily maximum	— yearly	average	 	52.5°F.
Mean daily minimum	yearly	average	 	41.7°F.
Mean			 	47.1 °F.
Absolute maximum.			 	86°F. on 12th August, 1953.
Absolute minimum			 	16°F. on 20th February, 1955.
Ground frosts	yearly	average		72
Humidity	yearly	average		79.9%
Rainfall	- yearly	average		26.08 inches.
Dry days	yearly			193
Sunshine	yearly	average		1407.35 hours.
Greatest amount in				
one day				16.6 hours on 14th June, 1957.
Winds	— yearly	average		N. 28, N.E. 26, E. 25, S.E. 27,
				S. 44, S.W. 61, W. 75, N.W. 67.

In 1958 the weather was on the whole unsatisfactory, for only 1,281 hours of sunshine were recorded as compared with 1,443 hours in 1957 and a similar figure in 1956, whereas in 1955 the hours of sunshine were approximately 1,700. 1958 was, moreover, a wet year and once again May, June, July and August were wet months, July with 4.8 inches of rain, being quite exceptional. Snowfalls were noted in January, February and March. The sunshine reading of 1,281 hours is to be compared with the figure of 910.9 hours at King's College, Newcastle and 1,308.9 hours at Cockle Park. Once again, the obvious loss of sunshine due to the heavy atmospheric pollution of the riverside becomes apparent.

Social Conditions

In regard to the figures very kindly supplied to me by Mr. J. Weightman, Manager of the Windmill Hills Employment Exchange, there is evidence of some recession of employment in the district during the year. At the end of the year there were 1,164 men, 428 women, 25 boys and 11 girls unemployed, giving a total of 1,628, which is nearly double the figure of 914 for 1957 and 956, the figure for 1955.

Registered disabled persons numbered 2,033, 1,766 being men and 267 women. 144 men and 53 women, a total of 197, were unemployed. Of this number 23 men and 2 women were suitable for employment only under sheltered conditions.

National Assistance

Mr. T. P. L. Bruce, the Area Officer of the Assistance Board, has supplied me with the following information for the year 1958. 5,708 persons were in receipt of National Assistance at the end of the year. These were made up of 540 persons who were unemployed, 892 persons suffering from physical or mental illness, 3,112 pensioners and 358 non-contributory pensioners and 806 others. In this last group there are included widows under 60, women separated from their husbands, or who have not earned a pension, together with a number of persons of both sexes over the pensionable age who have to wait until they reach the age for entitlement to the old age pensions.

National Insurance Sick Benefit

The weekly return of fresh sickness claims received from the local offices of the Ministry of National Insurance covers the Dunston area of Whickham, which is outside the Borough. Nevertheless the figures are an accurate index of the general level of sickness, and normally the number of fresh claims runs between 350 and 500 per week. In 1958 the year began with some 900 claims in the first week of January, and this figure gradually fell to the 400 level by May with a very marked intermission at the end of the first week of April. During the summer the figures ranged from 350 to 400, but the record low figure was 255 in the first week of August. Beginning in September there was a slight rise, so that the weekly return by mid-November had reached the figure of 550, but this fell away to a little above the summer level at the end of the year.

These figures are, on the whole, expressive of the absence of any severe epidemics in 1958, although the early months of the year were accompanied by the usual seasonal chest and other illnesses.

Welfare Services

Through the kindness of Mr. R. A. Haysom, Director of Welfares Services, the following information has been made available with regarding to the welfare services in 1958. There were 245 certified blind persons, a together with 54 others under observation because of serious deficiency officiation. Deaf and dumb numbered 133 persons, along with 110 others who were registered as being hard of hearing. In the Fountain View Welfares Hostel there were 317 residents, as compared with 310 at the end of 1957. This figure represents considerable overcrowding, if one takes into account the standard of floor space per individual. In Beacon View Hostel there were also 15 tenants under the supervision of a warden, 18 others attached between the supervision of a warden attached between the supervision of a warden attached between the supervision of a warden attached betwee

Deprived Children

Through the kindness of Miss Duffey, the Children's Officer, the information is available that there were 181 children in the care of the Committee at the end of 1958, together with 27 other children from the Borough who were accommodated in approved schools. These figures are to be compared with a total of 202 in care in 1957 and 22 in approved schools. Of the deprived children 48 were maintained in residential nurseries and homes, 79 were boarded out, 10 were under supervision and 9 boys and 5 girls were accommodated in their respective hostels for working boys and girls. There were 20 children in voluntary homes and 4 were in attendance at special schools. 4 were in sea-training schools and 2 others were in residential employment. 6 boys and 12 girls were accommodated in the respective hostels at the request of other areas.

Institutional Facilities for the Aged and Infirm

It is regretted that there is no substantial change in the poor and inadequate facilities available for the hospital and hostel care of the aged and infirm. Within recent years it was intended that the whole of Whinney House Hospital, with a capacity of some 60 beds, would be available for geriatric cases, but at the end of 1958 only the upper floor providing some 24 beds were in use for geriatrics.

D. General Statistics of the Area

Population (estimated by Registrar General 1958) (includes added area)	109,900
Area of Borough (in acres)	4,559
Population of present Borough (Census 1931) (included added area)	124,545
Population of present Borough (Census 1951)	115,039
Number of Inhabited Houses (Valuation Lists)	33,879
Density of Population per acre	24.1
Number of persons per inhabited house	2.24
Rateable value at 1st April, 1958	61 007 460
Estimated product of penny rate 1958/59	(2,000
Rate in the £ levied 1958-59	23/6d

E. Vital Statistics for 1958

L	ive Births Legitimate Illegitimate			Males 1,003 32	Females 915 34	<i>Total</i> 1,918 66	<i>Rate</i>3.3 per cent. of total live births
	Total			1,035	949	1,984	18.05 per 1,000 population
Si	till Births			20	20	57	(area comparability factor 0.96)
	Legitimate Illegitimate	• •	• •	29 2	28 1	57 3	
				31	29	60	29.3 per 1,000 total births
	Total Live and	Still	Births	1,066	978	2,044	
,	Deaths	• •		704	590	1,294	11.7 per 1,000 population (area comparability factor
	Excess of birth	s ove	er deaths	331	359	690	1.19)
	Infantile Morte	ality					
	Legitimate	• •	• •	37	20	57	29.7 per 1,000 live legitimate births
	Illegitimate	• •		2	1	3	45.4 per 1,000 live illegitimate births
) pipundan	39	21	60	30.2 per 1,000 live births

Neo-natal Mortality Legitimate Illegitimate	• •	29 1	15 1	44	
		30	16	46	23.1 per 1,000 live births
Maternal Mortality			1	1	40 1 000 total is inthe
(including abortion)			1	1	.48 per 1,000 total births
Deaths from Tubercul	osis				
(a) Pulmonary		18	4	22	.20 per 1,000 population
(b) Non-pulmonary		1		1	.00 per 1,000 population
		19	4	23	.20 per 1,000 population
Deaths from Epidemic	Dise	ases			•
Meningococcal infect	ion	1	1	2	
Virus encephalitis		1		1	
Influenza		2	2 3	4	
Gastritis, enteritis		1	3	4	
		5	6	11	.1 per 1,000 population
Deaths from Cancer		131	93	224	2.0 per 1,000 population

Population

The continual draining of the Gateshead population into adjoining areas due to the housing situation must cause some concern to the local authority. Since the census of 1951 the population has gone down by 5,000 persons. As it is the young and active people who emigrate, the figures mean a drifting of the wage-earning and self-supporting community out of the district, leaving a growing burden in the town of the infirmities and conditions due to old age which will require institutional care and domiciliary care from the remaining active groups of the population. In other words, a growing need for service on the part of the ageing population will have to be met by a declining active section of the population unless some effort is made to reclaim the lost population of the borough by an amalgamation of the borough and its adjoining districts into a new local government authority. The position in 1958 in regard to Gateshead and its adjoining areas is given in the following table:—

Ger	gistrar neral's timate 1958	Census 1951	Census 1931	Census 1921
Gateshead 1	09,900	115,039	124,545	125,142
Felling U.D	29,980	25,284	27,040	26,145
Whickham U.D.	24,160	23,148	20,756	19,155

Births

The birth rate of 18.05 per 1,000 of population approximates to the average birth rate in recent years and has to be compared with the national rate of 16.4

The stillbirth rate of 29.3 per 1,000 total births represents a slight deterioration on the figure of the previous year, while the illegitimated birth rate of 3.3 per cent. of the total live births is improved on the position in 1957.

Deaths

The death rate as calculated at 11.7 per 1,000 of population is the same as the national death rate, but when adjusted by the comparability factor of 1.19 emerges to that extent worse than the national average.

In 1958, the infantile mortality rate of 30.2 per 1,000 live births relapsed somewhat on 27.6, the figure for 1957 which was the lowest ever recorded.

The principal causes of infantile mortality were:—

Prematurity	27
Congenital defects	8
Pneumonia	9
Meningococcal infection	2
Asphyxia and atelectasis	5
Intracranial haemorrhage	2
Other causes	7

The number of deaths from prematurity represents a 50 per cent. increase on the figure for 1957, and the cause of this completely eludes elucidation.

Maternal mortality was restricted to one death from a rare disease of the kidneys in pregnancy. It certainly was not in the category of a preventable death.

So far as the general population was concerned, the killing diseases were:—

Diseases of heart and ovascular lesions of						
circulatory disease (627 (48.4%)
Cancer						224 (17.3%)
Pneumonia and other res			ases			173 (13.3%)
Tuberculosis—all forms						23
Ulcer of stomach and du						19
Notifiable infectious dise						
Meningococcal infe	ction 2,	, Virus	encepl	halitis	1,	3
Suicide						17
Motor vehicle accidents						19
All other accidents						31

As compared with the previous year, attention must be drawn to the large increase in the deaths from motor vehicle accidents which only numbered 8 in 1957, and a slight increase in the deaths from suicide which numbered 14 in 1957. 825 of the deaths were in persons over the age of 65, i.e. 63.7 per cent. The average age at death was 65.2, as compared with 65.0 in 1957. The number of deaths from tuberculosis shows a slight increase from 20 in 1957 to 23 in 1958, while deaths from epidemic diseases numbered 7, which is fairly low and included 2 deaths from meningococcal infection, one from virus encephalitis and 4 from influenza. There were also 4 deaths from non-specific gastro-enteritis, which may, in some cases, have been the result of infection.

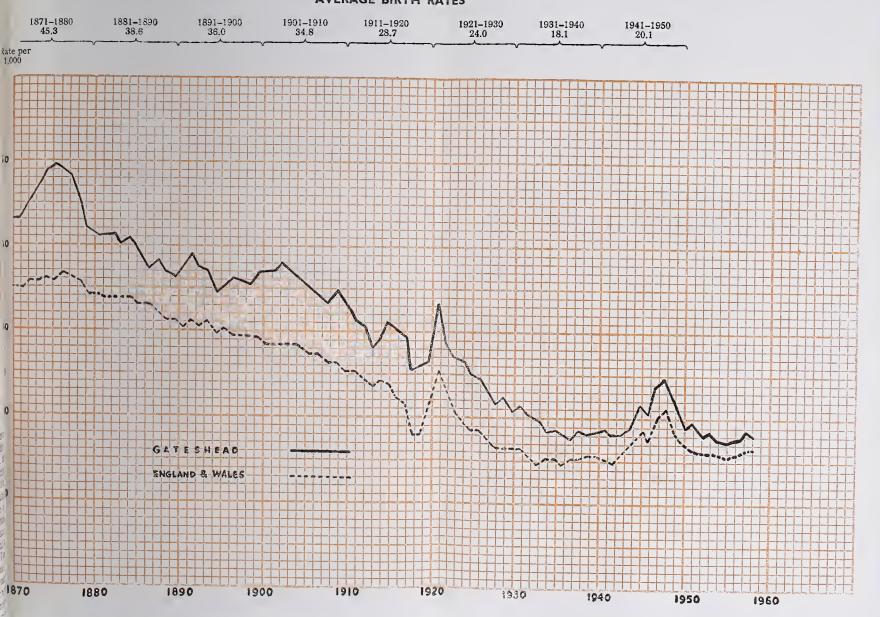
Deaths from cancer, totalling 224, are analysed below, with the sites of the disease:—

Age Distribution	Males	Females	Total
0-15 years	2		2
15-25 years			
25-45 years	5	4	9
45-65 years	58	30	88
65-75 years	39	30	69
75 years and over	27	29	56
	131	93	224
Site of the Disease			
Larynx	1		1
Maxilla	î		$\overline{1}$
Lip			
Tongue	1		1
Mouth	1	1	1 2 2 9
Throat	2		2
Oesophagus	6	3	9
Stomach	19	12	31
Intestine (small)	2 8 6		2
Caecum, colon	8	13	21
Rectum	6	7	13
Gall bladder	$\begin{array}{ccc} \dots & 1 \\ \dots & 2 \\ \dots & 2 \end{array}$	7 2 2 4	13 3 4
Liver	2	2	6
Pancreas	2	4	0
Peritoneum Lung, bronchus	49	3	52
N # 1 1	43	3	32
Breast		14	14
Cervix uteri		14	14
Ovary		5	5
Vulva			
Prostate	8	0-91-01-07-09	8
Testis	8 1 2	dura emili	1
Kidney	2		2
Bladder	4	3	7
Brain	4		8 1 2 7 4
Other and unspec			
sites	11	10	21
	131	93	224

In regard to the mortality for 1958 some attention might be directed to the mortality from diseases of respiratory organs, a mortality that must t have some reference to atmospheric pollution. In 1958, deaths from bronchitis numbered 97, from broncho-pneumonia 47 and from pneumonia 13. There were also 52 deaths from cancer of the lung and 16 deaths from diseases of the respiratory system. This is a very formidable total and puts the respiratory diseases in the group next to diseases of the heart and circulation as a cause of death. Indeed it is very probable that the respiratory diseases are much more concerned with disability in the wage-earning population than the circulatory diseases and the burdenn seems to fall more on the male sex. As one watches the Tyneside area, one must conclude that it would be a matter of great surprise if the thick pall of smoke that so often lines the river valley in the lower reaches did not produce its effects on public health, effects which appear to be much more serious than any damage done to the health of the human population of the riverside by the gross pollution of the Tyne. Some steps are being taken

County Borough of Gateshead BIRTH RATES per 1,000 population 1871 - 1958

AVERAGE BIRTH RATES

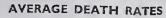


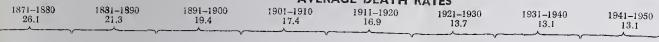


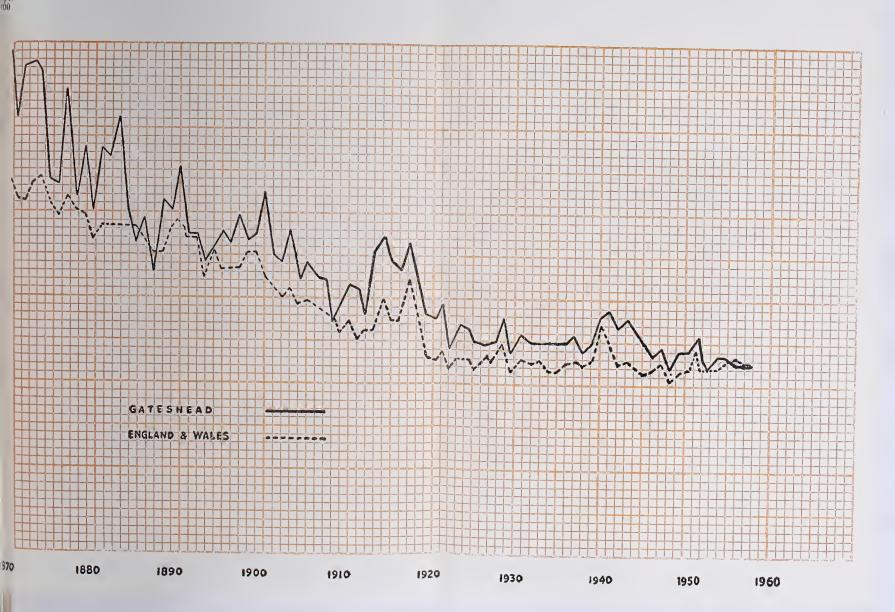
County Borough of Gateshead DEATH RATES per 1,000 population

(at all ages and from all causes)

1871 - 1958









to deal with this problem, so that attention should be focussed each year to see whether the gradual application of the Clean Air Act in future years is producing any corresponding reduction of mortality.

It is of interest to summarise the local experience of mortality from lung cancer, which is given in the table below:—

Year	Total	Year	Total	Year	Total	Year	Total
1958	52	1952	43	1946	18	1940	12
1957	61	1951	31	1945	17	1939	16
1956	43	1950	40	1944	13	1938	10
1955	53	1949	23	1943	17	1937	5
1954	46	1948	29	1942	20	1936	8
1953	41	1947	33	1941	18	distriction	

COMPARABLE STATISTICS FOR GATESHEAD AND NEIGHBOURING AUTHORITIES, 1958

New- Gates- South Sunder- Tyne- North-

_	castle	head	Shields	land	mouth	umber- land	Durham
Registrar General's estimated population	272,400	109,900	108,600	185,100	68,700	470,300	935,800
Comparability factor						0.00	2.0.4
(a) births	0.97	0.96	0.93	0.94	0.95	0.98	0.96
(b) deaths	1.13	1.19	1.20	1.24	1.12	1.10	1.21
Crude birth rate per	18.61	18.05	19.13	20.86	17.96	17.08	18.6
1,000 population Birth rate as adjusted	16.01	16.03	19.13	20.80	17.90	17.00	10.0
by factor	18.05	17.3	17.80	19.61	17. 0 6	16.74	17.9
Crude death rate per	10.00	17.0	17.00	13101	17.00	2017 1	2
1,000 population	12.51	11.7	12.16	10.88	12.11	12.05	11.3
Death rate as adjusted							
by factor	14.14	13.9	14.60	13.49	13.56	13.26	13.6
Infantile mortality rate	24.86	30.2	23.58	25.37	32.41	24.03	25.44
Neonatal mortality ,,	16.77	23.1	19.25	17.09	29.17	18.30	17.9
Stillbirth rate	21.81	29.3	16.56	24	26.81	22.75	23.2
Maternal mortality rate	0.386	0.48	1.41	0.76	0.78	0.24	0.67
Tuberculosis rates per							
1,000 population (a) Primary notification	2						
-respiratory	1.09	1.11	1.363	1.0	0.77	0.52	0.60
-non-respiratory	0.17	0.1	0.074	0.1	0.07	0.11	0.09
(b) Deaths	0,1,	-	• • • • • • • • • • • • • • • • • • • •				
-respiratory	0.106	0.20	0.16	0.092	0.06	0.06	0.11
—non-respiratory	0.007	0.00	0.01	0.022	0.01	0.01	0.02
Death rates per 1,000							
population from:—							
Cancer (all forms (in-							
cluding Leukaemia	2.44	2.0	2.37	2.04	1.82	2.08	1.93
and aleukaemia) Cancer, Lungs and	2.44	2.0	2.37	2.04	1.02	2.00	1.73
bronchus only	0.62	0.47	0.52	0.52	0.46	0.41	0.38

F. Ward Statistics

It is quite impossible now to give any ward statistics for the twelve wards of Gateshead, as these will have to be based on accurate figures which will only be available in the census due to be held in 1961.

G. Statistical Rates for the last ten years

	1958	1957	1956	1955	1954	1953	1952	1951	1950	1
Population	109,900	110,900	111,900	113,200	113,610	113,500	114,600	114,700	115,500	114,
Births: uncorrected										
number net number	2,480 1,984	2,476 2,064	2.354 1,951	2,244 1,916	2,291 1,951	2,353 2,033	2,224 1,993	2.392 2,185	2,338 2,117	2, 2,
Birth rate per 1,000 pop'n	18.5	18.6	17.4	16.9	17.1	17.9	17.3	19.0	18.3	1
Deaths: reg stered	1,371 12.4	1,381 12.4				1,372 12.0	1,402 12.2	1,554 13.5	1,502 13.0	1,
crude rate transfers out transfers in	12.4 263 196	12.4 229 125		254 105		12.0 181 109	12.2 195 143	13.3 182 148	13.0 188 144	
Net number Death rate per	1,294	1,277	1.280	1,348		1,300	1,350	1,520	1,458	1,
1,000 pop'n Infantile	11.7	11.5	11.4	11.9	11.8	11.4	11.7	13.2	12.6	3
mortality: deaths	60	57	56	59	56	67	82	96	101	
rate per 1,000 live births Maternal death	30.2	27.6	28.7	30.7	28.7	32.9	41.4	43.9	47.7	4
rate per 1,000 total births	.48	.47	.99	2.01	2.49	0.47	Nil	1.34	0.46	1
Tuberculosis death rate	.20	.18	.17	0.22		0.27	0.42	0.5	0.64	(
Zymotic death rate	.1	0.27	0.017	0.026	0.017	0.02	0.02	0.06	0.17	(
Cancer death rate	2.0	1.93	1.79	2.25	2.0	2.0	2.0	1.79	1.93	2

PART II

HEALTH SERVICES OF THE AREA

The National Health Service, since its very commencement, has been bedevilled by the question of finance, an aspect which has interfered with the logical development of many highly desirable if not essential improvements in an area in which the basic facilities providing for the people of Gateshead Borough must be stretched to serve the wider area including Gateshead. By mere counting of hospital beds, it is possible to state a case that there are enough beds for the population of the Gateshead Hospital Management Committee area, especially if this is somewhat under-assessed and reckoned at 160,000, and not at around 200,000, which is the actual population of Gateshead, Felling, Whickham and Blaydon. What has happened is that the hospitals which were provided by the ratepayers to serve Gateshead only, namely the Queen Elizabeth, Sheriff Hill, Bensham and Whinney House Hospitals, have been utilised to serve the much larger population of the Gateshead Management Committee area, with very little real addition in hospital accommodation until the former Ministry of Pensions Dunston Hill Hospital was put under the Gateshead and District Management Committee in 1957. This hospital, however, accommodates persons who live outside the Gateshead area, in addition to its prime purpose of providing for ex-service pensioners who are ill. It has been and is still necessary to depend on the Queen Elizabeth, Sheriff Hill and Bensham Hospitals, to meet the needs of the local population for hospital facilities, and although there has been some upgrading and improvement of the buildings there has been very little in the way of additional bed provision since 1948, when these hospitals were absorbed by the state. In a similar way, the Gateshead Mental Hospital at Stannington, now called St. Mary's Hospital, built and extended by the ratepayers of this Borough, and serving also South Shields before the appointed day, still continues ot serve the Borough in common with other areas adjoining the Tyne.

The hospital bed provision for this area, although in number apparently adequate, is not so in quality. There are crowded conditions in some of the acute wards and a certain wastage of chronic beds. Thus, there is a number of beds occupied by persons suffering from mild mental disease or defect who have reached Bensham Hospital by devious routes in former years, and who remain there, some under orders made under the Mental Deficiency Acts, some under orders made under the Lunacy Act, some under no order at all, and some merely lodged as in a "place of safety." It is to be hoped that these subnormal persons, many of whom belong to Gateshead, will be cared for in future in residential institutions designed specially for their care and training, a function of the Regional Board. If this were done, it would at once release some beds to be used as hostel provision for the aged or as hospital provision for the geriatric patients.

The problem of geriatrics in Gateshead is one about which there has been much talk and anxiety. It is agreed by all that the bed provision for geriatrics in Gateshead and the surrounding area is much too low and compares very unfavourably with the number of beds provided in the

Sunderland area, for instance. Steps are being taken to turn Whinney House Hospital into a geriatric unit of about 50—70 beds. One great need that is apparent is some hospital accommodation for aged persons suffering from dementia.

Preparations are being made to upgrade the acute surgical ward of Bensham Hospital into first class accommodation for surgical cases by equipping the unit with a theatre in which major surgery can be carried out. This will be a useful improvement of hospital facilities, and may relieve pressure on other acute surgical beds, but it does not go far enough.

In the pre-war era, the local authority set out to provide a good general hospital for the population of Gateshead. The plan originally envisaged on the Sheriff Hill site some 250 general beds with provision for throat, nose, ear and eye diseases and for sick children. Unfortunately, during the war the plans were modified and simplified. Soon after its commencement, the actual work on the site was interrupted for some three years, and when resumed the building was restricted to one storey instead of three. The hospital, named after the Queen Mother, has attempted to meet local demands by a certain amount of overcrowding of the wards. In the view of the medical officer of health, the first step to improve the hospital accommodation for Gateshead would be to build the ward accommodation of the Queen Elizabeth Hospital to take the 250 patients originally planned for and to provide satisfactory out-patient facilities for a hospital of this size, accepting surgical, medical, obstetric and orthopaedic cases of every kind.

Reference to the Regional Hospital Board report suggests that the Gateshead hospital needs, originally classed as a top priority, have slipped very far down the list, presumably because other areas have exercised greater pressure on the Regional Hospital Board.

A. HOSPITAL AND SPECIALIST SERVICES

(Part II of the National Health Service Act, 1946)

1. Hospital Services

Through the courtesy of the House Governor of the Newcastle upon Tyne United Hospitals and the secretaries of the various management committees, it has been possible to continue the table of annual admissions of Gateshead patients to the appropriate hospitals.

This table is reproduced below, and reflects not only the trend of hospital admissions but the great change that has occurred since the days before the National Health Service Act. As compared with the previous year, the admissions to the principal Gateshead hospitals are stationary but there has been a considerable increase in the number of Gateshead patients admitted to Dunston Hill Hospital. On the other hand, admissions to the Newcastle hospitals seem to have declined, with the exception of the admission of patients suffering from throat, nose and ear defects who have been dealt with at Walker Gate Hospital, or at the Ear, Nose and Throat Hospital. There was a slight fall in the number of admissions to St. Mary's Hospital, but there were only two admissions to Prudhoe Hospital, a figure that reflects the shortage of accommodation for mental

defectives in the region. It will be noted from the appropriate part of the report that there are no fewer than six mentally defective children in urgent need of hospital care.

Gateshead

Hospital	adn	resneaa iissions ig 1958	Hospital Management Committee
Bensham General Hospital		2,408	Gateshead and District
Queen Elizabeth Hospital		2,622	do.
Sheriff Hill I.D. Hospital		929	do.
Whickham and District War Memo	rial		
Hospital		455	do.
Gateshead Children's Hospital		592	do.
Whinney House Hospital		23	do.
Normans Riding Hospital		214	do.
Dunston Hill Hospital	• •	697	do.
Clinics: Chest, Gateshead			
Chest, Whickham			
Newcastle General Hospital		392	Newcastle upon Tyne
Hospital for Sick Children (Flem	ning		
Memorial)		111	do.
Ear, Nose and Throat Hospital		110	do.
W. J. Sanderson Orthopaedic Hosp.	ital	3	do.
Walker Gate Hospital		203	do.
Town Moor I.D. Hospital		described to the second	
Royal Victoria Infirmary		839	Newcastle upon Tyne United
Duinesses Many Matamity Hospital		60	Hospitals Board of Governors
Princess Mary Maternity Hospital	• •	60	do.
Mental Hospitals and Institutions			
St. Mary's Hospital, Stannington		275	St. Mary's
Prudhoe and Monkton Hospital	• •	2	Prudhoe and Monkton
Other Hospitals			
Hexham General Hospital		14	Hexham and District
Wooley Sanatorium		66	do.
Shotley Bridge		128	North West Durham
Poole Sanatorium		1	Cleveland
Stannington Children's Sanatorium		10	Wansbeck
Holywood Hall Sanatorium		2 3	South West Durham
Seaham Hall Sanatorium		3	Sunderland area

In view of the current interest in the question of domiciliary and hospital midwifery, the following particulars relating to the Gateshead hospitals may be worth noting:—

		Queen Elizabeth Hospital		Bensham Hos	General pital	Total		
		Live	Still	Live	Still	Live	Still	
Gateshead Other areas	• •	594 435	26 15	394 170	12 5	988 605	38 20	
Totals		1,029	41	564	17	1,593	58	

2. Bacteriology

The very excellent service rendered by the Medical Research Council, in the regional Public Health Laboratory at Newcastle, is exemplified by the long list of specimens examined which could not be attained in any purely local laboratory. It is thanks to the work of the bacteriologists and virologists that we have much of our present-day freedom from infectious disease and its consequences. The siting of the bacteriological and virological investigations in a building which is also devoted to blood transfusion and to hospital pathology raises a question as to whether it would not also be useful to include an analyst in the Public Health Laboratory Service, and so remove a brake on the frequency with which food and milk are examined chemically. The following list covers the bacteriological work carried out in 1958 on specimens originating in Gateshead:—

(a) Prevention and Treatment of Diseases:		
Throat swabs for organisms	29	
Nasal swabs	4	
Sputa for tubercle bacilli	2,294	
Other specimens for tubercle bacilli	9	
Blood specimens for Widal reaction	_	
	1,087	
Urine for organisms	31	
Eye smears for gonococci	5	
Cerebro-spinal fluid for organisms	1.0	0.470
Miscellaneous	19	3,478
(b) Milk:		
T. T. Milk	10	
Pasteurised Milk	124	
T.T. Pasteurised Milk	31	
Milk for tubercle bacilli for inoculation	3	
School milk supply	30	198
^ * ·		
(c) Water Supply	10	10
(d) Food:		
(Cooked meat, cooked ham, orange juice,		
pigs kidneys)	4	4
pigo manojo)	·	•
(e) Control of Venereal Disease:		
(1) Blood Wassermann Tests		
(i) Practitioners	75	
(ii) Ante-natal clinics	1,485	
(iii) V.D. Clinics	720	
(2) C Cl		
(2) Cerebro-spinal fluid	4.4	2.201
V.D. Clinics	11	2,291
		£ 001
Grand Total		5,981

3. Blood Transfusion Service

The Regional Headquarters of the Blood Transfusion Service continues to function in the Pathological Unit of the Newcastle General Hospital. The relation to the Local Authority covers principally the sampling of blood in the municipal clinics for expectant mothers, these being examined for blood grouping, rhesus testing and also separately for Wassermann reaction. There is very good co-operation between the blood transfusion service personnel and all the doctors carrying out ante-natal work.

B. LOCAL AUTHORITY HEALTH SERVICES

(Part III of the National Health Service Act, 1946)

1. General Remarks

Two opposite trends in the last year continue to be manifest in the local authority services. Financial pressure has already closed one day nursery and at the end of the year was threatening a second day nursery, so that the four day nurseries providing some 326 places during the war and in the immediate post-war years will shortly be reduced to a single day nursery providing 116 places. At the same time, steps have definitely been taken to plan and erect a municipal health centre in the rapidly developing Wrekenton area. This centre will be built in such a way as to leave room for further addition and will also be associated with the provision of some housing accommodation for the local midwife and district nurse. This is a justifiable expansion in an area where public buildings suitable for health purposes are non-existent, and the area itself contains a large number of tenants displaced from the lower part of the Borough as a result of housing operations, while many tenants, rehoused in the Felling area from the Borough, also live in close proximity. Other efforts towards the expansion of the District Nursing Service have had to be somewhat restrained because it is felt that the staff is adequate to give the necessary nursing attention to patients who ought to be nursed in their own homes. There may be, however, some inadequacy when the staff is exploited to nurse patients who should properly be accommodated in hospital. In recent reports this shortage of geriatric accommodation has been frequently stressed. It is a responsibility of the Regional Hospital Board to provide enough accommodation of this type for the Gateshead citizens and there is no doubt that the number of beds per 10,000 of population provided for geriatric purposes in the Gateshead Management Committee area is well below the national average. In the absence of geriatric accommodation, many cases requiring nursing care are being admitted to the welfare hostel, which is not equipped either as regards staff or premises to provide geriatric care. As a rule the welfare hostel provision run by the local authority is hopelessly overcrowded.

In 1958, much of the effort of the local authority medical staff was directed to the immunisation of the population against poliomyelitis. At the same time, the objective of immunising against the more common diseases has continued. It is exactly this activity of the local authority that is mostly responsible for the decline in the demand for hospital accommodation for the acute infectious diseases.

2. Clinics and Welfare Facilities (as at 31st December, 1958)

(1) Greenesfield House and Health Centre.

Child Welfare Centre ... 2 p.m.-4.30 p.m.—Tuesday and Thursday

Ante and Post-natal Clinic ... 2 p.m.-4.30 p.m.—Wednesday

Dental Clinic ... 9 a.m.-5 p.m. daily (by appointment)

Saturday 9 a.m.-12 noon

Orthopaedic Clinic ... Fortnightly by appointment (orthopaedic treatment daily by appointment)

Tuesday and Saturday mornings by ap-Ophthalmic Clinic pointment (Orthoptic treatment daily by appointment) Mondays and Thursdays—pre-school children. Tuesdays and Fridays—school Artificial Sunlight Treatment children, 2-4 p.m., Saturday—special cases. Immunisation Clinic Tuesday fortnightly, 2 p.m.-4 p.m. (preschool children) Saturday, 10 a.m.-12 noon (school children) weekly (2) Chest X-ray Unit 2 p.m.-4.30 p.m. Monday and Wednesday Old Dispensary Building -ante-natal cases (up to 5 months) Tuesday and Friday—general public and doctors' cases. Thursday—Children over 10 years. 5.30 p.m.-7 p.m. Monday and Thursday —General public and doctors' cases. (3) Gateshead District Nurses' Home Ante and Post-natal clinic Tuesday, 2 p.m.-4.30 p.m. (District Nursing Association cases only). (4) Bensham Methodist Church Hall 2 p.m.-4.30 p.m. Tuesday and Thursday Child Welfare Centre (medical sessions). Immunisation and Vaccination 2 p.m.-4 p.m. Tuesday (fortnightly). (5) Low Fell Presbyterian Church Hall Child Welfare Centre 2 p.m.-4.30 p.m. Mondays and Wednesdays (medical sessions). Immunisation and Vaccination Monthly, 1st Wednesday, 2 p.m.-4 p.m. (6) Moore Street Methodist Church Hall Child Welfare Centre p.m.-4.30 p.m. Monday (medical session). Monthly, last Monday, 2 p.m.-4 p.m. Immunisation and Vaccination (7) Wrekenton—St. Oswald's Church Hall Child Welfare Centre ... 2 p.m.-4 p.m. Monday. Immunisation and Vaccination Monthly, 1st Monday, 2 p.m.-4 p.m. (8) Victoria Road Methodist Church Hall Child Welfare Centre 2 p.m.-4.30 p.m. Friday. Immunisation and Vaccination Monthly, 1st Friday, 2 p.m.-4 p.m. (9) Carr Hill Health Centre Minor Ailments Clinic 9 a.m.-10 a.m. daily. Wednesdays, 2 p.m.-4.30 p.m. Child Welfare Centre Monthly, last Wednesday, 2 p.m.-4 p.m. Immunisation and Vaccination (10) Lobley Hill, Rowanwood Gardens, All Saints' Church Hall Child Welfare Centre Thursday 2 p.m.-4.0 p.m. Immunisation and Vaccination Monthly, 1st Thursday, 2 p.m.-4 p.m.

Friday, 2 p.m.-4.30 p.m.

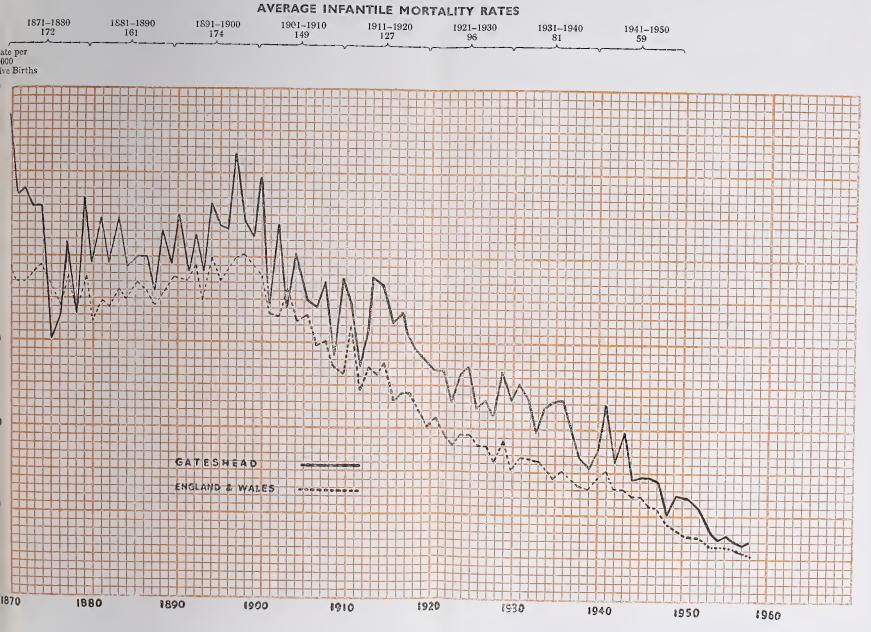
Monthly, last Friday, 2 p.m.-4 p.m.

(11) Old Fold Centre, Old Fold Road Child Welfare Centre ...

Immunisation and Vaccination

County Borough of Gateshead INFANTILE MORTALITY per 1,000 live births

1871 - 1958





3. Local Hospitals serving the area (Out-patient consultations)

Queen Elizabeth Hospital Medicine Dr. C. N. Armstrong Tuesday p.m. Dr. H. A. Dewar Friday a.m. Dr. D. W. Ashby ... Tuesday a.m. Diabetic Clinic Registrar .. Saturday a.m. (new cases) Monday a.m. (old cases). Surgery Mr. J. Henderson Monday, Thursday, Friday a.m. Mr. T. H. Tweedy Wednesday a.m. . . Mr. B. V. McEvedy Friday p.m. Gynaecology Mr. D. F. Smith Thursday p.m. Obstetrics ... Maternity bookings through almoner. Orthopaedic Wednesday a.m. Mr. A. E. Bremner Dermatology Dr. T. Parkin Monday and Friday p.m. Psychological Medicine Dr. J. J. Justice Thursday a.m. . . Bensham General Hospital Medicine Monday, Wednesday and Friday a.m. Dr. D. W. Ashby ... *Orthopaedic* Mr. D. G. Wright Wednesday p.m. Whinney House Chest Clinic 9 a.m.-5 p.m. daily (Saturday 9 a.m.-12 noon). Whickham Cottage Hospital Surgery Mr. J. Henderson Friday p.m. Mr. T. H. Tweedy Tuesday a.m. *Orthopaedic* Mr. A. E. Bremner Friday p.m. Children's Hospital Ear, Nose and Throat Wednesday a.m. (adults) Mr. R. G. Chaytor Friday p.m. (children) *Orthopaedic* Mr. A. E. Bremner Wednesday a.m. (alternate weeks). Dr. D. Ramage. Radiology Physical Medicine ... Booked through physiotherapist. . . Dr. J. R. Horler ...

4. Maternity and Child Welfare

(Report by Dr. Jean M. Bainbridge)

(a) Births

There were 1,984 live births registered during 1958. Of the total live births, 1,035 were males and 949 were females. This represents a birth rate of 18.5 per 1,000 of population, showing a decrease of 0.1 per 1,000 from 1957. 60 births (31 males and 29 females), or 3.0 per cent. were illegitimate, a drop of 0.9 per cent.

Attended by	No. of live births	No. still biri	
Doctors	 199		11
Midwives	 673		8
Princess Mary Maternity			
Hospital—in wards	 45		2
Bensham Hospital	 394		12
Queen Elizabeth Hospital	 595		25
Craigielea Nursing Home	 		
Other Nursing Homes	 78		2

In all of the doctors' cases a registered midwife was in attendance as a maternity nurse.

Stillbirths

There were 60 stillbirths during the year. Of these, 31 were males and 29 were females, making a stillbirth rate of 29.3, and an increase of 0.9 on the previous year.

39 of the stillbirths were among premature babies.

(b) Infantile Mortality

There were 60 deaths among infants under the age of one year, giving an infantile mortality of 30.2, which is 3 more than last year. The neonatal death rate was raised from last year. 46 infants died under the age of one month, making a rate of 23.1. 41 of these died during the first week; and of these 34 died during the first 24 hours.

There was a decrease of five in the number of children who died over one month old; there were 14 children in all. Of these, 2 died from meningococcal infection, 1 from influenza, 1 from pneumonia, 3 from broncho pneumonia, 1 from heart disease, 2 from congenital malformation 1 from asphyxia and atelectasis, 1 from neonatal hepatitis, 2 from intussusception. Of the 46 who died under the age of one month, 27 were due to prematurity, 6 from death due to congenital malformations and conditions incompatible with life, 4 were due to pneumonia, 1 died from bronchopneumonia, 1 from acute pulmonary oedema, 1 from pulmonary haemorrhage, 2 from intracranial haemorrhage, 4 from asphyxia and atelectasis. Prematurity is still the main cause of death among young infants. Of the 46 infants who died under the age of one month, 27 died from prematurity.

This year 22.0 per cent. of the babies were being breast-fed at four months old. It is to be deplored that there is so little breast-feeding, as the breast-fed infant is so much more able to withstand infection than the artificially fed infant.

Deaths from Stated Causes at Various Ages under One Year of Age

10.8

6,252

			CIII (III)		Total	or rage						
	Under	1-2	2-3	3-4	deaths under		3-6	6-9	9-12		al de er 1 j	
						months		months	months	M.	F.	T.
causes: certified uncertified	41	2	1	_2	46	5	4	2	3	39	21	60
ningococcal fections rt disease nenzal croup nonia ncho-pneumonia te Pulm. oedema genital defects nature birth hyxia and	$\frac{-}{3}$ $\frac{-}{1}$ $\frac{3}{3}$ $\frac{27}{1}$		1		4 1 1 6 27		1 1 - 1	11	- 1 1 - 1	1 1 1 3 1 6 17	1 4 1 -2 10	2 1 1 5 4 1 8 27
electasis acranial	4	_			4		1		-	3	2	5
emorrhage n. haemorrhage natal hepatitis ssusception	2 1 —				2 1 —					2 1 1 1	<u> </u>	2 1 1 2
Totals	41	2	1	2	46	5	4	2	3	39	21	60
Moore Street Low Fell Victoria Road Wrekenton Lobley Hill Carr Hill				First v of chil 0-1 y	dren	3,5 1,8 2,1 1,4 7 1,5 1,7	ren of	irst visits children 1-5 years 118 251 77 92 34 50 69 82 56	of ch	evisiti vildre year 65 1,39 52 1,04 58 37 73 71 30	n 2 4 9 5 8 0 8	
Totals			589	1	,262	15,1		829		6,33		
Centres				o. of	A atte at D	verage ndance octor's es s ions	Examin by m	Infant	Averag of Con tio	e No	- ?. !- r	
Greenesfield . Bensham . Moore Street Low Fell . Victoria Road Wrekenton . Lobley Hill . Carr Hill . Old Fold .		· · · · · · ·	5, 2, 3, 2, 1, 2, 2,	525 424 624 475 135 271 463 691 914		26 55.9 50.3 34.75 42.7 26.93 50. 51.76 18.28		669 1,208 627 938 711 477 720 579 323		6. 12.3 12.7 9.38 15.1 9.75 14.66 11.35 6.46	5 6 5	

23,522

Totals ...

39.6

Treatment

During the year 141 children were referred to the minor ailments' clinic and made 391 attendances.

The conditions treated were as follows:—

Scabies			5
Impetigo			10
Septic sores			11
Eczema and De	rmatitis		4
Other skin cond	litions		24
Eye Defects			10
Ear Defects			9
Miscellaneous c	condition	S	65
		-	
			138

146 children were referred to the refraction clinic; the following are the particulars:—

No. of appointments made	 146
No. of appointments kept	 129
No. for whom spectacles were prescribed	92

(d) Nursery Schools

Prior Street and Brighton Avenue Nursery classes continued to care for about 60 children between the ages of 2 and 5 years. Another 20 children were accommodated in the Bensham Settlement. The Bensham Nursery School has not yet been rebuilt.

Priority admission was given to children whose mothers were employed or in ill-health.

A health visitor makes weekly visits to treat minor ailments, and one of the school medical officers makes regular visits to examine the children medically.

(e) Day Nurseries

While the day nurseries are primarily for the children of mothers who have to work, either because they are widowed, divorced or separated, or have invalid husbands, I think it should be noted that children are admitted for other reasons. For example, a mentally subnormal child, whose mother was finding him very difficult to control at home and who was awaiting admission to a mental colony, was allowed to attend for a trial period at one of the nurseries, and it was interesting that the other children accepted him, frequently helped him in small ways and were never unkind to him. Thus the mother's burden was relieved for some considerable time. Similarly a child was admitted because both parents were deaf and dumb and it was necessary that the child should have contact with normal children. When she was first admitted she was speaking very slowly, but when she left three years later she was speaking very fluently. Children are sometimes also admitted for short periods where the mother is ill and in hospital.

During the year all the children in the nurseries were examined medically and dentally.

The following infectious diseases occurred among the nursery children:—

		Holy inity	South Close	Total
Scarlet fever	 		2	2
Measles	 	6	26	32
Mumps	 			_
Chickenpox	 	8	1	9
Whooping cough	 	-		
Dysentery	 			
German measles	 	21	7	28

Nurseries and Child Minders' Regulations Act, 1948

The Beth Midrash Lemoroth Nursery for Jewish children has continued throughout the year at 61 Rectory Road. It is now open from 9 a.m. until 12 noon. The nursery has places for 20 children and has been fully occupied during the year. When visited the children in this nursery appeared to be happy and well cared for.

(f) Milk and Other Foods sold during 1958

This department has continued to work smoothly during the year. Ladies from the Women's Voluntary Services have helped with the distribution of welfare foods at Greenesfield Health Centre, attending on Monday and Friday of each week and giving extra help during holiday periods.

During the year the following amounts of National Dried Milk and Vitamin foods were supplied:—

81,873 tins of National Dried Milk 7,272 bottles of Cod Liver Oil 5,037 packets of Vitamin Tablets 50,000 bottles of Orange Juice

£9,006 11s. 0d. was taken in stamps for National Dried Milk, 2,961 were issued free, and 1,714 tins were sold at 4/- a tin to mothers who wished to purchase more than the Ministry allowed at the lower price, the total amount taken being £9,349 7s. 0d. £1,039 12s. 6d. was taken for orange juice, 324 bottles being issued free.

The following amounts of milk and other foods were sold during 1958:—13,887 packets of Dried Milk, 5,069 bottles of Adexolin, 53 tins of Barley, 866 packets of Farex, 428 packets of Groats, 89 jars of Malt and Oil, 141 jars of Malt and Iron, 465 bottles of Minadex, 51 jars of Numol, 772 pkts. of Baby Rice, 2,802 tins of Ovaltine, 177 packets of Robrex, 511 tins of Robsoup, 3,516 bottles of Rose Hip Syrup, 532 Scott's Twin Packs, 463 packets of Trufood Cereal, 49 jars of Vimaltol, 373 jars of Marmite, 1,867 jars of Virol, 2,539 packets of Rusks, 24 tins of Ready Cooked Groats (large).

Receipts amount to £3,840 1s. 8d., against a cost of £3,479 12s. 8d.

(g) Care of Premature Infants

During the year, 203 premature infants were born to Gateshead mothers. 164 were born alive. The particulars of these were as follows:—

Place of birth	No. of l ive births	Deaths under 24 hours	Deaths under 28 days	Alive
At home	. 63 . 59 . 33 . 9	4 4 6 2	5 3 —	54 52 27 7
Totals	. 164	16	8	140

Of the 76 premature infants who were born at home, 63 were born alive and 13 were stillborn. The following are the particulars of those who were born alive:—

Weight at birth	Total	Died under 24 hours	Died under 28 days	Alive
3 lbs. 4 ozs. or less 1000 gms1500 gms	4	2	1	1
Over 3 lbs. up to and including 4 lbs. 6 ozs. Over 1500 gms2000 gms	13	2	2	9
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs. Over 2000 gms2250 gms	16		1	15
Over 41bs. 15 ozs. up to and including 5 lbs. 8 ozs. Over 2250 gms2500 gms	30		1	29
Totals	63	4	5	54

Owing to the shortage of midwives the premature nurse, who was also a fully qualified midwife was switched back to the midwifery service on the 19th July, 1958, and up to that date the premature nurse had paid 1,030 visits. After the 19th July, the midwives individually looked after premature babies they had delivered. This system seems to be working very well as a temporary expedient.

Cots, blankets, hot water bottles etc. were lent to the parents on 15 occasions.

(h) Care of Illegitimate Children

There were 60 illegitimate live births in the Borough in 1958, 31 males and 29 females.

The following is a summary of the particulars of these:—

	Living		Left		In			dren living with or near relative
Total No. of child- ren -	with mother or near relative	adopt-	the district or not	Board- ed out	resi- dential nurs-	Died	Children well cared fo r in good home	Home conditions poor but child thriving
60	53	1	2	1	1	2	47	6

Of the illegitimate children who died, one died from extreme prematurity, weighing only 1.3/4 lbs. at birth, and the second child had multiple congenital abnormalities. In neither case could the deaths of the children be attributed to lack of care on anyone's part.

There is one voluntary organisation for rescue and moral welfare in Gateshead, the St. Faith's Home, in which expectant mothers are received from Gateshead, and from various parts of the country. Four girls were paid for by the Local Authority.

Arrangements are also made through the Health Department for girls to be received into homes out of the town and payment is made for them by the Local Authority. Under these arrangements one girl was paid for at the Brettagh Holt Maternity Home, Kendal.

The mothers accommodated at St. Faith's Home attend the hospital ante-natal clinic, and arrangements are made for them to be confined in hospital.

In Gateshead, a large proportion of the illegitimate children remain at home, and are looked after by their mothers or relatives.

(i) Ophthalmia Neonatorum

There were no cases of ophthalmia neonatorum notified during 1958.

(j) Ultra-Violet Ray Therapy

19 new cases and 22 old cases attended the clinic for treatment and made 171 attendances. They were treated for the following defects:—

Rickets
Anaemia
Debility and not gaining weight
Subnormal nutrition
Bronchitis

Anorexia Adenitis Nasal catarrh Urticaria

8 completed the treatment and were improved.

(k) Hospital Treatment for Ailing Children

Such children belonging to the Borough are usually referred to the following hospitals:—

The Children's Hospital, Gateshead

The Children's Department of the Royal Victoria Infirmary, Newcastle

The Queen Elizabeth Hospital, Gateshead

The Fleming Memorial Hospital, Newcastle.

It is the custom of the hospitals to forward to the Health Department a copy of the discharge letter sent to the patient's own doctor.

(1) Exceptional Children

The following list of special cases among children under 5 years receive extra attention from the health visitors, who see that treatment is obtained where necessary.

At the age of two years, the name of the children among these cases who are likely to require special educational facilities are passed on to the school medical service, so that suitable arrangements can be made as early as possible.

Congenital defects Orthopaedic cases Deaf and dumb or deaf Speech defects Hare lip or cleft palate Mentally retarded Eye defects Miscellaneous Total		76 62 6 7 21 47 105 38 362
The congenital defects comprised:—		
Imperforate anus Spina bifida Hypospadias Achondroplasia Congenital heart disease Oesophageal atresia Defective hands or feet Minor defects Exomphalos Meningocele Hernia Hiatus hernia Fibrocystic disease of pancre Naevus Stridor Webbed toes Hydrocele Undescended testes	as	4 7 3 2 20 1 2 2 2 1 23 1 1 2 1 2 1
Mentally Retarded Mongols		9 8 22 5 2 1
Talipes Spastic Deformity of feet or hands Genu valgum Genu varum Flat feet Birth injury Congenital dislocation of hip Torticollis Defect of spine Defect of cartilage of knee Hammer toes Ingrowing toe nails Paralysis following poliomye	• •	19 3 6 2 6 5 3 2 4 2 1 2 1 6

Miscellaneous				
Enlarged liver and	spleen		• •	1
Asthma	•		• •	8
Exomphalos .				1
Eczema				17
Delicate				2
Cyst, neck		• •	• •	2
Removal of (L) kid	ney .	• •	• •	1
Pinks disease .		•	• •	1
Minor defects .			• •	4
Diabetes			• •	1
En defeate				
Eye defects				0.7
Strabismus .	•	• •	• •	87
Strabismus . Ptosis	•	• •	• •	2
Strabismus		• •	• •	87 2 8
Strabismus . Ptosis		• •	• •	2
Strabismus	duct	• •	• •	2
Strabismus	duct	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	2
Strabismus	duct		• • • • • • • • • • • • • • • • • • • •	2 8 1 1
Strabismus Ptosis Congenital catarac Blocked lachrymal One eye enucleated Glaucoma	duct			2 8 1 1
Strabismus Ptosis Congenital catarac Blocked lachrymal One eye enucleated Glaucoma Retrolental fibrople	duct			2 8 1 1

Midwifery Service

(a) Midwives

51 midwives notified their intention to practise midwifery in the Borough. They were distributed as follows:—

Municipal midwives		 13	
District Nurses' Home		 8	
Private		 2	
Queen Elizabeth Hospita	al	 13	(6 whole-time
			2 part-time).
Bensham Hospital		 15	(5 whole-time,
			2 part-time).

The following is a summary of the work of the Supervisor of Midwives Mrs. M. A. Bolam:—

Routine visits to midwives	60
Special visits to midwives	30
Visits to stillbirths	56
Nursings and deliveries supervised	7
Visits to cases of ophthalmia	
neonatorum	
Visits to premature babies	187
Special visits	233
Unsuccessful visits	95
Routine interviews with midwives	400
Attendances at ante-natal clinics	47
Visits to puerperal pyrexia	12
Visits to neo-natal deaths	43

At the routine visits paid to the domiciliary midwives, inspections were made of their register of cases, temperature charts, ante-natal records, bags and appliances.

During 1958, two midwives retired, but three others reached the retiring age and elected to continue. During the summer months there was not, as there had been in previous years, any midwife available to

relieve our midwives' holidays. On the 19th July, 1958, the premature baby nurse, who is also a qualified midwife, was returned to the maternity service, and during the year the service has continued to function largely because of the devotion to duty of the midwives. This shortage of midwives does not appear to be confined to district midwives. The hospitals in Gateshead during the same period, were also short, and other authorities in this area were equally short of hospital midwives and municipal midwives.

At the end of the year there were 9 full-time midwives on the staff.

(b) Ante-natal care

Summary of Work at Clinics

The following is a summary of the attendances at the various clinics:-

Centre	No of sessions	No. of 1st visits	No. of revisits	Total attendances	Average per session
Greenesfield District Nurses' Home	51	80	240	320	6.1
	48	45	259	304	6

Blood was taken for routine Wassermann and Rhesus Test at the municipal clinic and at the Queen Elizabeth Hospital Clinic. In all, 1,619 specimens were tested and there were 2 positive cases.

During the year all the mothers were invited to have their chest x-rayed as a routine on their first visit to the ante-natal clinic.

(c) Maternal Welfare

There was one death associated with pregnancy during the year.

No.	Age	Cause of Death
1	43	Bilateral cortical necrosis of the kidneys followed by
		abortion, the duration of pregnancy being 22 weeks.

(d) Puerperal Pyrexia

The following is an analysis of the cases notified under the Regulations:—

		Removed		
Case No.	Attendance	to Hospital	End Result	Remarks
1	Hospital		Cured	Normal delivery. Developed pyrexia on 11th day due to mastitis of the left breast. Temperature normal again in 48 hours.
2	Hospital		Cured	Caesarean section for placenta praevia with a placenta accreta. Pyrexia developed on 2nd day. Temp. settled immediately after dilatation and curettage for removal of retained products 10 days later.
3	Doctor	No	Cured	Normal delivery. Developed pyrexia 2nd day. Treated with chemotherapy, temperature returned to normal on 6th day.
4	Doctor	No	Cured	Normal delivery. Developed pyrexia immediately. Temp. gradually returned to normal 5 days later.

5	Doctor	No	Cured	Normal delivery. Pyrexia developed on 3rd day, temp. returning to normal about 3 days later. Temp. appeared to be due to a sore throat and infection of a perineal laceration.
6	Doctor	No	Cured	Normal delivery. Pyrexia developed on 7th day, remained elevated for 24 hours and then subsided.
7	Doctor	No	Cured	Normal delivery. Pyrexia developed on 11th day due to influenza. Temperature settled within 24 hours.
8	Hospital		Cured	Normal labour. Repair of incomplete 3-degree tear. Developed pyrexia on 7th day due to urinary infection. Temp. settled down after 5 days' treatment.
9	Hospital		Cured	Breech extraction and forceps to the after- coming head. Developed pyrexia on 3rd day due to a urinary infection, which
10	Hospital		Cured	settled down after 3 days. Forceps delivery. No pyrexia whilst in hospital; discharged on 10th day and pyrexia developed 11th day. Pyrexia
11	Hospital		Cured	Case admitted to maternity as a case of prolonged first stage. She had a normal delivery and 2 days later was discharged home. She was well until the 4th morning and then developed a pyrexia. She was treated without much improvement. She was therefore admitted to Sheriff Hill I.D. Hospital 13 days after delivery. Diagnosis—infected retained products. Treated with chemotherapy. There was spontaneous emptying of the uterus and the patient recovered.

(e) Emergency Cases

In 24 cases, where a doctor was not previously engaged, medical aid was called by the midwife for the mother, infant or both.

In 17 cases, the medical aid was for the mother, and in 2 cases for mother and baby for the following emergencies:—

	Doctors called by				
	Municipal midwives	D.N.A. midwives	Other midwives		
Lacerated perineum .	4	7			
Malpresentation	1	general comp			
Pyrexia	1	1			
Ante-partum haemorrha	ge 1				
Post-partum haemorrhag					
Phlebitis	2				
Anaemia	1				

In 5 instances the medical aid was for the infant.

	Municipal nuidwives	D.N.A. midwives	Other midwives
Prematurity		1	
Dangerous feebleness	1		***************************************
Jaundice		1	turner than to
Congenital abnormality	Name of the last o	1	
Birth injury	NAMES OF THE PARTY OF	1	******

(f) Hospital Accommodation for Maternity Cases

The following is a summary of the Gateshead cases admitted to the Princess Mary Maternity Hospital during the year:—

Live births 45 Still births 2

There were 406 births, including 12 stillbirths, to Gateshead mothers in the Bensham General Hospital, and 620 total births, including 25 stillbirths, in the maternity unit of the Queen Elizabeth Hospital.

(g) Nursing Home

A nursing home situated at Craigielea, Low Fell, is registered to take 8 maternity cases. As the matron does not wish to continue the midwifery side of this home there were no cases admitted during the year.

(h) Consultant Aid for Emergency Cases

During 1958, the emergency team provided by the Hospital Boards was called out on 7 occasions. This is an increase of 6 on the previous year and I think it is a good thing that this emergency service provided by the Hospital Board is being used more and more.

(i) Midwifery Outfits

Midwifery outfits containing clothing and bed-linen necessary for both mother and infant are available at the ante-natal clinic. No outfits were borrowed during the year.

(j) Municipal Midwifery Scheme (Midwives' Act, 1936)

The following is a summary of the work done by the municipal midwives:—

	No. of	cases	Ma of	77 £	Anda	
Midwife	Attended as midwife	Attended as mat. nurse	No. of morning visits	No. of evening visits	Ante- natal visits	
1 2 3 4 5 6 7 8 9 10 11	57 31 48 57 18 55 60 18 22 34 91	12 9 27 17 13 17 17 15 4 13 6	923 523 825 888 477 1,008 863 505 351 797 1,158	157 120 190 194 83 228 193 116 83 178 218	330 190 333 297 181 375 177 171 141 325 293	
13		Across desired	3	and the same of th		
Totals	492	150	8,321	1,760	2,813	

Gas and air analgesia was administered to 6 mothers by the municipal midwives.

Trilene was administered to 390 mothers by the municipal midwives and to 245 mothers by the district nurse midwives.

Pethidine was administered to 367 mothers by municipal midwives and to 195 mothers by the district nurse midwives.

The district nurse midwives are not booked individually, but take the cases in turn. The following is a summary of the work done by them:—

No	o. of cases	$No.\ of$	No. of	Ante-
	as Attended as maternity nurse	morning visits	evening visits	natal visits
219	118	4,468	1,073	1,964

The following is a synopsis of the above cases:—

	No. of cases	Live births	Still births	Mis- carriages	Sent to hospital	Materna deaths
Municipal midwives District Nurse	642	605*	13	3	29	
midwives	337	308*	6	5	20	
Totals	979	913	19	8	49	

^{*}These figures include 8 and 2 sets of twins respectively.

There were 4 cases of puerperal pyrexia among the above.

In 24 cases, where a doctor was not previously engaged, medical aid was called by the municipal midwives or district nurse midwives, for the mother, infant or both.

(k) Post-Natal Clinic

The Clinic is held at the Greenesfield Health Centre, in conjunction with the ante-natal clinic on Wednesday afternoons.

During the year 9 mothers attended.

District Nursing Association (Post-Natal Clinic)

A post-natal clinic is also held at the District Nurses' Home in conjunction with the ante-natal clinic on Tuesday afternoons. During the year 14 mothers attended.

5. Health Visiting

There has been no change in the establishment of health visitors formulated by the Council in 1948. This consists of the superintendent and 20 nurses, each of whom acts as the school nurse and health visitor for a district. Like most other authorities, the personnel has been under the approved establishment and there were only 17 district health visitors at the beginning of 1958. During the year the student health visitor

completed her training to bring the establishment up to 18, but two health visitors resigned, one to resume her nursing career in hospital and the other for domestic circumstances. The depleted staff of 16 was, however, re-inforced by the end of the year by the addition of a former member of the health visiting staff, who returned from a period of service at Malta, to maintain the establishment at 17. Fortunately, the policy of recruiting the health visiting staff by training health visitors was successful in attracting three students who, it is anticipated, will complete the course of training in June, 1959, and bring the staff back to the establishment. In pursuit of this policy the Council also gave permission to continue recruiting student health visitors in order to maintain the service.

The work of the health visitors in 1958 is analysed in the figures given below:—

Summary of Home Visits

Infants Born at full term 1,778 Prematurely 138	Brea Part	our months ast fed ially breast ficially fed		393(22.0%) 172(9.7%) 1,217(68.3%)
Visits to Infants un First visit after no No. of revisits Visits to children Visits to children	otification 1-2 years		2,076 9,172 4,239 11,836	
Visits to Expectan First visits No. of revisits		• • •	557 218	
Whooping cough Pneumonia Scabies Scarlet fever Encephalitis Tuberculosis Poliomyelitis—ind Mumps	oculation	sessions	387 5 79 42 4 — 2 983 87 — 189	
Special cases, incl Ineffective visits			4,838	

The total number of visits by health visitors during the year was 34,721.

6. Home Nursing

The arrangements with the Gateshead District Nursing Association for the carrying out of the home nursing duties of the Local Authority date back to the 4th July, 1948, and for part of the Municipal Midwifery Service to 1937. The agreement under which these services are provided and financed by the local authority came up for review in 1958 and a new agreement, substantially the same as the preceding agreement, was in process of drafting at the end of the year.

At the end of 1958, the following staff was employed by the District Nursing Association and worked from their base at the Nurses Hostel, Coatsworth Road:—one superintendent, one assistant superintendent, 9 Queen's nursing sisters, 4 Queen's male nurses, 2 state registered nurses, 6 student district nurses, one state enrolled assistant nurse and 2 part-time Queen's nursing sisters. There were also 4 midwives employed under the Agreement, while one pupil midwife seconded for district training from the Queen Elizabeth Hospital was also available. These numbers compare with the establishment which has been approved temporarily by the Council, namely one superintendent, 2 assistant superintendents, 16 female Queen's nurses, 4 male Queen's nurses, one part-time district nurse and 4 student nurses, together with one state enrolled assistant nurse. number of student district nurses varies in accordance with recruitment and their availability for work depends too on the stage of their training. The following table lists the work done by the Gateshead Nursing Association on behalf of the Local Authority in 1958.

	Acute illness		$M\epsilon$	Maternity		ic illness		Total
	Cases nursed	Visits	Cases nursed	Visits	Cases nursed	Visits	Cases nursed	Visits
No. on books a 1st January, 19:			3		323		349	The state of the s
No. nursed in: January February March April May June July August September October November December	0.0	850 1,234 789 422 608 510 365 543 496 554 668 673	36 32 39 51 43 32 29 41 43 46 39 40	748 571 631 721 772 604 603 650 699 763 687 599	412 399 395 380 379 362 366 362 358 364 353 391	5,444 4,741 5,636 5,409 5,507 4,786 4,994 4,907 5,141 5,290 4,881 5,119	535 519 514 488 487 453 444 462 474 486 463 499	7,042 6,546 7,056 6,552 6,887 5,900 5,962 6,100 6,336 6,607 6,236 6,391
No. on books at 31st December, 1958	30		11		314		355	or-andalditare his shinker appropries
Total cases nurs and visits paid during year	557	7,712	336	8,048	971	61,855	1,864	77,615

During 1958 the work seems to have been somewhat easier than in the previous years, when the figures were respectively 2,194 and 2,096 patients nursed and 76,038 and 77,165 visits. There were, in 1958, 1,864 patients nursed and 77,615 visits paid.

An additional table is included classifying the ages and conditions for which home nursing was carried out in 1958 :—

Diagnosis	Under 1 year	1 to 5 years	5 to 15 years	15 to 65 years	Over 65	Total
Acute respiratory disease	 1	6	8	91	31	137
Chronic respiratory disease	 	-	_	53	29	82
Burns and scalds	 	2 5		2	5	9
Post operations	 2	5	5	77	29	118
Chronic Dressings and Septic						
conditions	 4	19	22	139	52	236
Fractures for G.A	 	-	1	4	12	17
Diabetes	 			5	75	80
Enema	 	2	3	30	30	65
Threadworms	 	1	1			2
Stroke				24	70	94
Carcinoma	 PR-987-00 N	Aller to a security		46	45	91
Rh. Arthr ⁱ tis	 	From contest		6	22	28
Acute Rheumatism	 		MATTER SECTION	2	2	4
Heart complications	 	Martin Fr. 179		50	129	179
Pernicious anaemia	 	-		17	42	59
E.N.T. Conditions	 		1	1		2
Pulmonary Tuberculosis	 -	1		42	3	46
Other Forms of Tuberculosis	 -		1	3	1	5
Infectious diseases	 1	1				2
Miscarriage	 	-		1		1
Maternity complications	 	4		17		17
Gynaecological	 -			14	108	122
Influenza	 	-		14	8	22
Senility	 mounts to be		t	_	110	110
	 8	37	42	638	803	1,528

Of the 1,528 patients suffering from general illness who were nursed, 1,138 were medical, including gynaecological, 316 were surgical, 17 suffered from complications of pregnancy or puerperium, 55 suffered from tuberculosis and 2 from infectious disease.

As explained in last year's report, the Wrekenton District has grown to such an extent that the County area requires the whole-time services of a nurse, and for this purpose they appointed the existing nurse who was paid by the County Council. This left the Borough in the position of having to appoint a whole-time nurse for the part of the Wrekenton district which lies within the Borough, and Mrs. Gardner, who was fully conversant with the area, and indeed had often worked with the Durham County Nursing Association, was appointed to the post. She took up her duties on the 1st April as a whole-time nurse for the Wrekenton area of the Borough. Unfortunately, it was not possible to make reciprocal arrangements with the County Council to cover illnesses and holidays of the Wrekenton nurse, so that it is arranged that the Gateshead District Nursing Association will supply the necessary cover in these circumstances.

In 1958, the Wrekenton district nursing service covered the care of 123 patients, entailing the making of 3,349 visits. These patients embraced 27 cases of acute illness, 5 of tuberculosis and 91 of chronic illness. 26 of the patients were still on the books at the end of the year. It is interesting to note that 38 of the patients were over 65 at the time of the first visit and that 19 patients required more than 24 visits during the year.

7. Home Help Service

At the end of 1958 the home help service consisted of the supervisor, assistant supervisor, 6 full-time helps and 83 part-time helps. One male help was also employed. This total of 90 persons is 5 less than the previous year and somewhat less than the authorised establishment of 80 full-time home helps. Most of the part-time home helps do 23 hours a week, as compared with the full working week of 38 hours. To deal with emergencies the medical officer of health has standing permission from the Council to recruit seasonal home helps in excess of the establishment laid down.

Expenditure on the service in 1958 was estimated at £20,510 and receipts at £650. These figures have changed very little over the last few years, and some comment ought to be made on the low returns. In Gateshead the scale of assessment for the services of a home help is based on the income of the husband. Not unnaturally the old age pensioners and elderly persons in receipt of National Assistance emerge with no assessment being made for the service of a home help. areas a minimum charge for a home help has been made, and these sums are collected from the recipients of the service whatever their means, the Assistance Board being prepared, it is understood, to finance the recipients of the home help service to the minimum figure mentioned. This money, however, is paid to the recipients and not to the Local Authority. attempt to develop such a scheme in Gateshead failed, when it was pointed out that it was the duty of the Local Authority under the Act to provide this service to those needing it, and to provide it free when the recipient could not afford to pay.

One rather tragic feature of the home help service has been the disappearance of the demand for maternity home helps. It is obvious that there is no greater need for a home help than in the case of the married woman with children who is expecting a new arrival or who has already given birth to a child. Indeed the home help service in Gateshead started as a service of maternity helps only. Due to the system of assessment, when efforts are made to book the home helps, and the husband is working, as is usual, the charge for a home help can be as high as 4/- an hour to a man who is earning £14 and £15 a week. This full charge has to be compared with the usual charge of a private arrangement which may be as low as 2/6d. per hour, if one can obtain the services of a help privately. The reason for the difference is the additional administrative charges added to the actual wage paid to the home help. consequence of this high charge is that very often maternity home help is booked and cancelled when the assessment is made. Another anomaly that applies to the home help service and the assessment made in connection therewith is concerned with the elderly person who has a family of sons and daughters who are working. Such a person may be enjoying a pension or national assistance, but the work that is done in the household is as much for the benefit of those who are employed as for the old person. Nevertheless, there is no power to levy charges on the working members of the household other than the householder. It is understood that in such instances the supervisor has to restrict the amount of help to the minimum period necessary to deal with an emergency.

HOME HELP SERVICE 1958

	Days	1123 979 990 1004 1062 996 1030 173 1107 1107 1012
	Cases	432 444 444 444 453 453 444 444 440 470
S7	Total days	L0L80NNW44W4
Tuberculous	Total cases attend	444444444
Tub	Full time a	
	Part time	44444444004
	Total days	982 852 876 908 976 899 958 740 958 1042 958
Chronic	Total cases attend	337 339 344 346 405 403 412 412 412 413 437
CI	Full time a	
	Part time	337 339 344 346 405 403 412 411 411 411 413 429
	Total days	124 111 85 62 74 86 66 36 48 48 48 45
Acute	Total cases attend	89 89 89 89 89 89 89 89 89 89 89 89 89 8
	Full time a	
	Part time	88 88 88 88 88 88 88 88 88 88 88 88 88
	Total days	222 226 26 66 66 67 118 118
Maternity	Total cases attend	-4 \cdot 4 4 \cdot 1 \cdot 0 \cdot 1 4
Ma	Full time a	
	Part time	-4 × 4 4 4 1
	Total days	4 6
Ante-natal	1	-2
Ante	Total Full cases time attend	
	Part time	-2
	Month	January February March April May June July August September October November December

Toal days given	$62\frac{1}{2}$	11086½ 113 866	12137
Total cases helped	during 1958 4 5	493 21 166	689
	1.1.58	331	414
New cases	Ante-natal 3 Tuberculosis 1	Acute	275

Mrs. Maitland, the Supervisor of Home Helps, has furnished me with the following report, which I reproduce unaltered:—

Report of the Supervisor

"The total number of cases during 1958 numbered 689.

The number receiving help on 31st December was 450, classified as follows:—

Maternity	 	
Acute	 	18
Chronic	 	428
T.B	 	4

The number of maternity cases still continue to fall because of the cost. Many of these cases could be served if the Maternity Home Grant was taken into account instead of the whole income.

The majority of our 400 chronic cases are between 80 and 90 years of age who have no relatives at all or whose families are too old themselves to cope with looking after them, which means many more visits have to be made to these old people because of their being house-bound and pathetically lonely.

Instead of the home-helps going in from 9.0 a.m. to 1.0 p.m. twice a week, we find 3 visits of 2 hours is much more appreciated and helpful.

Numbers of these old peoples' rooms have been papered and painted by their home-helps. It has been a great tonic to them as quite often they would tell you nothing had been done for nearly 20 years. In many instances, it has taken the old folks five or six weeks to save the money to buy the wallpaper which has been got from shops clearing odd rolls at a greatly reduced cost—a room has been papered and white-washed for as little as 10/-.

Many of the older cases between 80 and 90 are quite unable to bath themselves. Two of the elderly type of home-helps take out soap and towels from the department and can do 7 or 8 in a morning, attending to their hair and feet, making them both comfortable and happy until their next visit, which is always looked forward to with pleasure.

Although so many perhaps would be better in care, they appreciate this attention in their own homes."

The policy of assisting in the bathing and washing of the old people by way of the home help service was started last year, and it appears to have been remarkably successful. Furthermore, the home helps themselves collect money and provided 250 parcels of food and Christmas comforts at the end of the year, the finances being defrayed by various activities sponsored by the home helps themselves. To deal with emergencies, the Committee gave permission for a telephone to be installed at the home of the supervisor.

8. Vaccination and Immunisation

Under this heading the local authority is now offering vaccination against smallpox, immunisation against diphtheria, whooping cough and tetanus, protection against poliomyelitis by vaccination and inoculation with B.C.G. vaccine against tuberculosis. In Gateshead, the usual procedure is to offer smallpox vaccination at or about three months, beginning the three injections against diphtheria, whooping cough and tetanus at 6 months and before the end of the first year adding the two injections of poliomyelitis vaccine. All of these are given subcutaneously or intramuscularly in the buttock or the arm. Somewhat exceptionally, B.C.G. vaccination is given to the tuberculin insensitive school children in their 14th year of life by intradermal injection.

The Local Authority has adopted the omnibus resolution which allows an extension of the vaccination and immunisation schemes as the vaccines and prophylactic substances meet the approval of the Minister.

There is no doubt whatever that these preventive measures directed at the individual have paid a very rich dividend in the avoidance of mortality, diminution of disability and absolute prevention of the diseases against which they are aimed. The trouble is that by their very success in abolishing corresponding diseases there is no longer the urgency to carry out the immunisation procedures, and so it seems to be with vaccination against smallpox and immunisation against diphtheria. The important thing in making use of these now traditional safeguards in the first year of life is all the more cogent because it is only from these procedures that the necessary stimuli can be used so that the body may begin the manufacture of its own antibodies.

(a) Vaccination against Smallpox

During 1958, 781 persons were vaccinated and 114 re-vaccinated. The numbers included 664 infants under one year, 48 other children under school age, 14 school children and 55 adults. Adults accounted for 102 of the re-vaccinated. Out of 1,984 infants born in 1958, it would appear that only 664 or 33.4 per cent. had been vaccinated. This level is quite inadequate for communal protection. 448 primary vaccinations

were carried out by the local authority medical staff and the remainder by the family practitioners. Curiously, it is the family practitioners who carry out most of the re-vaccinations, but these are necessitated by the intended emigration of the persons vaccinated.

No case of generalised vaccinia or post-vaccinal encephalitis came to light during 1958, nor was there any other untoward complication of vaccination or immunisation noted.

(b) Immunisation against Diphtheria

During 1958, 1,104 children under 5 and 164 children of school age, a total of 1,268, completed a full course of immunisation. 1,228 children received the 'booster' injection of the diphtheria toxoid to stimulate the immunity mechanism when they first attended school.

Of the inoculations against diphtheria, 891 were carried out by local authority staff and 377 by the general practitioners. At the end of 1958, out of 9,100 pre-school children, only 3,750 children, or 41.2 per cent. had been immunised, and out of 16,600 children of school age 6,945 had completed a primary course of immunisation or had received a 'booster' dose (41.8 per cent.). Altogether 10,695 children out of some 25,700 have been protected against diphtheria, a percentage of 41.6. This can by no means be regarded as a satisfactory level of communal immunity.

The prophylactics in use were the combined triple antigen and the formol toxoid manufactured by the Glaxo Laboratories.

(c) Immunisation against Whooping Cough

During 1958, 1,081 children were given the complete course of whooping cough prophylactic, using the combined vaccine in all instances. Of this total, 738 received their injections from the local authority medical staff and 343 from the general practitioners of the area.

The following tables, brought up to date, exemplify the improving outlook of the young child against whooping cough. It seems to be quite clear that previous immunisation against whooping cough reduces the communal incidence of whooping cough in those immunised to one quarter of the risk associated with the unimmunised.

Trend of Whooping Cough in relation to Immunisation

No. of Cases

Year	Births	Completed immunisations	Total	No. who had completed immunisation	No. of deaths
1940	1,951		131		3
1941	1,853		793		22
1942	1,835	w state	89	gamp tile filman	1
1943	1,917		435	property depter	8
1944	2,219		301	***	2
1945	2,097		220	guninament	2
1946	2,614		356	percent and	4
1947	2,756	756	349		11
1948	2,439	920	334	38	1
1949	2,265	1,020	67	4	1
1950	2,117	743	351	24	3
1951	2,185	1,082	231	17	
1952	1,993	501	246	21	
1953	2,033	1,023	513	53	2
1954	1,951	996	61	11	
1955	1,916	1,002	520	56	garanting witholitede
1956	1,951	933	356	53	glasgiff/responstrates
1957	2,064	1,021	99	16	
1958	1,984	1,081	125	15	

Notification and Attack Rates of Whooping Cough in children under 5 years

Year	Estimated population		Attack Rate per 1,000 of group population	No. of children under 5 inımunised	Notified and verified as imnun- ised cases	Attack Rate per 1,000 immun- ised	Deaths under 5 years
1946	9,000	276	30.7				4*
1947	9,930	272	27.4	685			11*
1948	10,203	260	25.4	1,555	9	5.7	1*
1949	10,540	54	5.1	2,284	3	1.3	1*
1950	10,890	224	20.6	2,786	11	3.9	3*
1951	10,920	171	15.6	3,130	16	5.1	
1952	10,100	162	16.0	2,792	17	6.0	
1953	9,700	356	36.7	2,904	34	11.7	2*
1954	9,600	44	4.6	3,020	3	.9	
1955	9,300	345	37.	3,119	27	8.6	-
1956	9,100	230	25.27	3,094	27	8.7	
1957	9,000	73	8.1	3,582	11	3.07	
1958	9,100	87	9.56	3,793	11	2.9	-

^{*} None of the fatal cases had previously been immunised.

(d) Immunisation against Tetanus

Through the triple antigen being used in 1958, 738 children of under two years have been immunised with the customary three injections. Along with these there were 224 children similarly treated by the family practitioners. Of the young children in the Borough there are therefore now some 1,600 actively immunised against diphtheria, whooping cough and tetanus, this result having been achieved without any untoward consequence whatever.

(e) Poliomyelitis Vaccination

1957 was essentially the year of registration of priority groups for vaccination against poliomyelitis. At the end of the year no fewer than 12,608 children under 15 years out of a population of 25,800 had been registered, but only 3,723 children had had a full course of prophylaxis, 1,574 through the local authority medical staff and 2,149 through the general practitioners. These totals have to be added to the 496 children inoculated in 1956, so that by the end of 1957 4,219 children had been fully protected against poliomyelitis. In 1958 steady progress was made throughout the year in accordance with supplies of vaccine that were available, and the following table lists the numbers who were treated in the official categories:—

Poliomyelitis Vaccination, 1958

	No. 1	vaccinated	
Group	By L.A. staff	General practitioners	Total
Pre-school children	1,294	1,570	2,864
School children	3,158	4,200	7,358
Expectant mothers	131	136	267
Young persons	22	23	45
General practitioners and families		40	40
Ambulance staff	8	8	16
Hospital staff	12		12
	4,625	5,977	10,602

In comment it must be said then that 2,864 (30 per cent.) out of 9,100 pre-school children had been protected against this disease by the end of 1958. 11,577 school children out of 16,600 (70 per cent. approx.) had also been immunised against this disease. Somewhat disappointing are the numbers of expectant mothers who were vaccinated in 1958, some 267 out of approximately 2,000.

Some parents must appreciate the facilities of poliomyelitis vaccination for no fewer than 222 persons had three injections. Although the third injection was not generally urged during 1958, some of the supplies of vaccine did recommend three injections and general practitioners followed the instruction on the boxes of vaccine rather than the Ministry of Health recommendation.

In addition to the foregoing, 598 other children received the first injection of a prophylactic course.

This work of vaccination against poliomyelitis will, of course, continue in 1959.

B.C.G. Vaccination

The work of protecting the school population against tuberculosis continued. Children born in the year 1944 were the group specially selected in 1958. Out of this group 640 were skin tested and 504 found to be tuberculin non-reactors. Of these 486 were actually vaccinated with the B.C.G. Freeze Dried vaccine. Subsequent re-testing of 269 of the vaccinated children showed that only one had failed to convert. This small but representative investigation of leaver school children shows that the number of positive reactors in 1958 was reduced to 23 per cent., as compared with 28 per cent. in the previous year. It is obvious that there has been a favourable change in the amount of tuberculous infection in the juvenile portion of the community.

Vaccination of contacts of cases of tuberculosis was carried out on those who were found to be negative reactors to tuberculin. Altogether 216 were tested and 200 were found to be suitable for vaccination. Altogether 252 contacts, including 61 newborn babies who would be exposed to tuberculous infection were treated with the B.C.G. vaccine during the year by the chest physicians.

9. Municipal Ambulance Service

The ambulance service, provided in 1943, has had to face a growing incubus of work since its foundation, including the necessary expansion consequent on the introduction of the National Health Service Act. In 1958 there is further evidence that the ambulance demand has become more or less stabilised for actually in that year there were fewer patients carried than in the preceding year, although the mileage was roughly the same. Petrol consumption dropped too, by over 1,000 gallons.

Reference was made last year to the difficulties that could arise at the Royal Victoria Infirmary, Newcastle, in serving the many authorities, patients from which were treated at the Infirmary. Gateshead has always worked in close liaison with Newcastle, and we have allowed the Newcastle control room at the Infirmary to represent the Gateshead service as well. I am pleased to report that no difficulty of any kind arose in connection with the transport of patients to or from hospital and that the new radio communication service has given no trouble whatsoever.

There was one unpleasant incident to record. An ambulance apparently hit the edge of the pavement and overturned. There were some minor injuries but the patients were quickly taken to hospital. The ambulance driver was found guilty of careless driving and as a result was dismissed the service.

During 1958 two stretcher ambulances were replaced by new vehicles and one sitting case clinic ambulance was also added.

Staff

The staff during 1958 consisted of one ambulance officer, one assistant ambulance officer, three senior drivers, 22 ambulance drivers, one telephonist and one clerk.

Cost of the Service in 1958

The annual cost of the service was £32,475, as against £35,465 in 1957. Revenue, including charges to other authorities for return journeys from Gateshead hospitals, amounted to £4,660, a similar amount to last year. The net cost of the service to Gateshead was, therefore, £27,815 compared with £30,805 in 1957. Charges made to other authorities were maintained at 3/- a mile for a stretcher ambulance and 1/6d. a mile for a sitting case car. These charges are based on an actuarial report of the Borough Treasurer.

Work of the Service in 1958

The following summarises the work of the ambulance service carried out during the year:—

out during the year .—	Patients	Other Persons	Journeys	Miles
Transport to and from Hospital by ambulance	22,898	677	5,430	73,016
Transport to and from Hospital by sitting case car	2,869	185	881	32,539
ambulance	14,885	13,321	2,701	54,043
Service journeys (Home disinfections included—42) Transport of beds etc.			898 28	7,807 227
Midwives transport and transport of anal- gesia apparatus			1,140	9,566
	40,652	14,183	11,078	177,198
Transport chargeable to other Au		_		
	Patients	Journeys	Miles	
Ambulances	882	689	6,874	
Sitting case cars	562	479	13,325	
Clinic ambulances	1,109	832	6,650	
	2,553	2,000	26,849	

This total includes 15 gallons issued by other authorities, and 83 gallons issued to the Civil Defence Service.

Transport by Rail

Arrangements were made for the transport of 24 patients by rail, involving a distance of 3,382 miles.

Vehicles

The service consisted of 7 stretcher ambulances, 4 clinic ambulances, 3 sitting case cars, 1 utility van and 3 civil defence ambulances.

Patients carried and Mileage completed since the Inception of the Service

	Patients	
	and other	
Year	Persons	Miles
1944		31,848
1945		53,080
1946		65,655
1947		79,979
1948		105,702
1949	27,576	149,557
1950	30,117	170,686
1951	29,820	172,806
1952	32,147	173,218
1953	43,702	171,576
1954	44,130	171,436
1955	51,368	173,904
1956	60,498	192,209
1957	60,571	188,152
1958	54,835	177,198

10. Prevention of Illness, Care and After-Care

(a) Tuberculosis

In the early part of 1958 the old tuberculosis dispensary was given up by the Regional Hospital Board as a chest clinic for the Gateshead and Felling patients. The new chest clinic is situated at Whinney House Hospital, which underwent extensive remodelling so far as the ground floor was concerned in order to provide suitable premises, including x-ray facilities, for the work of a chest clinic. The old tuberculosis dispensary building became a miniature x-ray unit after its equipment with an Odelca 100 mm. camera. A beginning was made in a small way in February, but in April the unit was made available for the general public, for expectant mothers, for patients with pulmonary complaints referred by their own doctors and school children and other types of chest examination, as for instance in connection with superannuation. The availability of this unit in Gateshead has been most valuable, special sessions being held on two evenings a week for the benefit of people who There has been some difficulty in obtaining a are working all day. radiographer but meantime the work of operating the unit has fallen to a clerk employed by the local authority and to a tuberc ilosis nurse who has been specially engaged for contact tracing as part of an M.R.C. research project.

The removal of the chest clinic proper to Whinney House has altered completely the position whereby all the tuberculosis records were concentrated in the grounds of Greenesfield House Health Centre. These records are kept at Whinney House, so that telephone enquiries have frequently to be made and, in addition, some kind of separate recording of cases must be maintained in the health department, a duplication of work which fortunately appears to be growing less as the prevalence of tuberculosis declines.

The work done in collaboration with the Medical Research Council has proceeded on the lines outlined in last year's report. The most hopeful approach to the prevention of tuberculosis continues to be a very thorough overhaul of the family contacts with some reference to wider contacts such as close friends and fellow workers. The routine tuberculin testing of infants at the end of the first year of life yielded only an individual instance of positive tuberculin response, but it is intended to retest each year the fairly large group of children who were tested at the end of the first year of life. The work of testing 5-year old children and children in the age group selected for B.C.G. vaccination continues, as does the tuberculin testing of all youthful contacts of notified cases of tuberculosis.

Special efforts have been made to re-assess the chest condition in patients who have been taken off the register as cured, and also to bring into the tuberculosis net the elderly male with alleged bronchitis who so often is found also to have a cavity and to be infectious. A special survey was also made of the chronic infector pool and strangely enough the number of these presenting a real danger to others was much less than would have been expected. Many affected in this way live alone or with other adult relatives and have very stationary and house-bound habits.

The special tuberculosis nurse, Miss Wilson, continued to devote herself to the work of contact tracing and associated x-ray examinations during the year, her services being paid for by the Medical Research Council, through arrangements made with the Gateshead and District Hospital Management Committee.

Tuberculosis in Gateshead 1938-1958

Statistics of the Chest Clinic

The table printed each year in this report is reproduced herewith with the figures for 1958:—

	lmonary fications	Pulmonary deaths	T.B	T.B.+	Total
·				·	
1933	283	140	86	136	222
1934	293	135	121	114	235
1935	203	129	70	86	156
1936	201	104	80	106	186
1937	178	118	68	95	163
1938	208	115	72	100	172
1939	183	119	77	101	178
1940	206	129	65	92	157
1941	207	128	93	75	168
1942	208	107	89	107	196
1943	219	106	90	111	201
1944	244	122	125	106	231
1945	218	98	103	99	202
1946	228	75	111	108	219
1947	237	93	119	107	226
1948	232	99	128	98	226
1949	250	91	157	91	248
1950	220	64	139	83	222
1951	227	47	152	74	226
1952	256	45	159	84	243
1953	266	29	155	112	267
1954	201	38	115	86	201
1955	166	23	105	61	166
1956	242	18	148	94	242
1957	125	19	66	59	125
1958	121	23	62	59	121
1700	, 20 1	am U			A. Aut A.

Notifications and mortality seem to be stationary over the last two years, as does the number of infectious cases of tuberculosis which have been discovered. It may be that some of the apparent decline of the disease in the last two years is related to the results of the mass x-ray campaign of 1956, when some 50 per cent. more infectious tuberculosis was discovered than has been the recent annual average.

At the end of 1958, the Gateshead Chest Clinic registers contained the names of 1,271 persons, of whom 1,163 were cases suffering from pulmonary tuberculosis and 108 from non-pulmonary disease. The pulmonary cases included 589 males, 479 females and 95 children and the non-pulmonary cases included 34 males, 47 females and 27 children.

B.C.G. Vaccination of Contacts

During the year, 650 young domestic contacts of cases of tuberculosis were submitted to the tuberculin test, along with two others who had not been in contact with the disease. 433 of these infants proved already to have been infected. Of the 200 negative reactors, 191 were vaccinated with the B.C.G. preparation, 61 babies under 6 weeks, 10 nurses in the local hospitals and two other members of the hospital staff were similarly vaccinated.

B.C.G. Vaccination of School Children

This protection was again offered to all school children in the 14th year. In 1958, it was therefore the turn of children born in 1944, of whom 1,238 were offered vaccination, 735 accepted, 640 were tested, 504 proved to be suitable, and of these 486 were given B.C.G.

Infectious Tuberculosis

From the records of the chest clinic there seemed to be 79 cases of infectious tuberculosis in the Borough, 50 being men, 27 women and two children. Included in these figures are the known chronic infectors, 27 males and 12 females, on whom much of the anti-tuberculosis effort is concentrated.

Assistance to the Tuberculous

In 1958, 37 special recommendations were added to those already lodged with the housing department for priority of rehousing. During 1958 some 39 were so rehoused and this forms 4.3 per cent. of the corporation houses let to new tenants.

Assistance with clothing and the loan of invalid aids is another feature of the local authority scheme. The following table summarises the activities under this head:—

Clothing issued: People assisted—3	Assistance given Pyjamas Slippers Nightdresses	• •	• •	4 pairs 1 pair 2
Invalid Aids Issued:				
Cases—4	Flannelette Shee	ate		1 noir
\.ascs—4		13	• •	1 pair
	Back rest			1
	Mattresses with	covers		2
	Bedstead			1
	Pillows	• •		2
	Sputum mug			1
	Bedpan			1
	Urinal			1

Besides this official action, the Invalid Care Committee controls a voluntary fund which is accrued from donations from various bodies each year and from the sale of the Xmas Seals supplied by the National Association for the Prevention of Tuberculosis. The monies so accumulated have been used to give financial help where this was needed, and especially the money is used to send a voucher for groceries to the value of 25/- to each necessitous household in which there was an incapacitated tuberculous person. A small donation of 5/- was sent to every tuberculous patient from the Borough in hospital. Altogether the sum of £159 7s. 6d. was disbursed during 1958.

During the year 19 patients were placed in light employment with various firms through the District Resettlement Officer of the Ministry of Labour. 23 others were sent to the Felling Rehabilitation Centre for training. One man was sent to Remploy as a boot and shoe trainee. Two men were sent to train as clerks, one to Shephard's Training College and one to Finchale Abbey. One man sent to Preston Hall Hospital, British Legion Village, Maidstone, in 1957, continues his rehabilitation and treatment in that institution.

In the matter of giving financial help to the tuberculous families it is important that the local authority should not overlap with the activities of the Assistance Board. The co-operation of the Board's officers with

the work of the local authority and regional board staff in this matter is specially acknowledged.

Venereal Disease

In connection with the work of the special clinic at the Newcastle General Hospital the health visiting service is used to trace contacts and follow up defaulters. In 1958, only one contact referred for follow-up was traced. There were 67 defaulters, including 3 children, and these were followed up, involving a total of 291 visits.

Invalid Aids

A very busy section of the Local Authority responsibility under the National Health Service Act concerns the supply of invalid aids. These are normally issued where the doctor or the Matron of the Nursing Association feels that they are necessary. The actual supervision of the issue of the invalid aids is carried out by the Supervisor of the Home Help Service. In a great number of cases the items listed are issued for longer periods of chronic illness and there is, as a result, a considerable wastage due to normal wear and tear, so that fresh supplies of certain appliances are constantly having to be purchased.

During 1958, the following items were issued on loan:—

Bed table				1
Bed pans				121
Back rests				98
Rubber sheet				74
Air rings and	spor	nge ring	gs.	73
Commodes				7
Urinals				64
Pr. Crutches				4
Feeding cup				1
Mattresses				12
Bed cages		• •		6
Wheel chairs				16
Iron bedstead	ds			4
Sputum mug				1
Fireguard				1
Plastic mattre	ess co	vers		2

(d) Convalescent Holiday Treatment

The Local Authority may arrange a convalescent holiday for invalids who are recommended this form of treatment by their own doctors, and who are unable themselves to procure such treatment. During 1958 applications were made on behalf of 40 persons, and these were dealt with as follows:—

- 23 cases admitted to Proctor Memorial Home, Shotley Bridge
 - 4 cases admitted to Silloth Convalescent Home
 - 1 case admitted to Shoreston Hall, Seahouses
 - 1 mother and baby admitted to Brentwood Recuperation Centre, Marple, Cheshire.
- 11 applications were withdrawn (either as unsuitable or for personal reasons).

The cost of the service was £294 11s. 4d. and the sum of £68 4s. 0d. was assessed as recoverable. Actually £31 5s. 8d. had been recovered by

the end of the year. Three cases were assessed as liable to pay the full cost, 14 part of the cost and in 12 cases no charge was made. This compares with £305 3s. 6d., being the cost of the service in 1957, when 26 patients were accommodated and the amount of £88 1s. 4d. recovered.

11. Mental Health

(a) Administration

The Mental Health Sub-Committee of the parent Health Committee is particularly charged with the direction of the Local Authority Service under the National Health Service Act in the problem of mental health. The actual work is carried out by three duly authorised officers who are advised by the consultants employed by the Newcastle Regional Hospital Board to deal with mental illness and mental deficiency respectively. Dr. J. J. Justice, the Medical Superintendent of St. Mary's Hospital Stannington, and his medical staff give every assistance to the duly authorised officers in the conduct of their duties, while Dr. G. McCoull, Medical Superintendent of Prudhoe and Monkton Hospital regularly reviews the mental defectives of the area with a view to advising in the priority of allocation of institutional beds and in the final diagnosis of doubtful cases. The Prudhoe and Monkton Hospital provides an observation unit for the close observation and assessment of patients, a facility that is frequently used.

The personnel of the mental welfare sub-committee is given below :—

Chairman: ALD. P. S. HANCOCK, O.B.E.

ALD. J. T. ETHERINGTON ALD. W. F. BARRON ALD. A. CROSSLEY ALD. MRS. E. A. HARDY ALD. J. HUTCHISON ALD. B. N. YOUNG COUN. MRS. M. BELL COUN. W. HARLAND COUN. MRS. A. HUTCHISON COUN. MRS. A. E. JEWITT

(b) Staff

The staff continues to consist of Mr. Mitchell, Miss Ogden and Mr. Gray, who arrange among themselves to give a 24-hour cover for the relevant duties. At the Occupation Centre, Miss McDermott, a qualified supervisor, arranges the training of the mental defectives, assisted by three assistant supervisors, of whom one, Mrs. Moore, is already a trained mental nurse.

(c) Co-ordination with Regional Board and Hospital Management Committees

No difficulties whatever have arisen at the staff level, but there is in this area a great shortage of accommodation, particularly for mental defectives and for persons suffering from senile dementia. In the past the use of the former Poor Law Institution as a place for receiving a mixed group of persons suffering from mental deficiency or low grade dementia has resulted in a local problem. It is known that the population of the mental departments of Bensham General Hospital is a motley collection of certified and uncertified patients, all of whom need care and supervision of the type given to low grade mental defectives and senile dementias. It may well be that some of these patients who are not certified may require accommodation in the local authority welfare hostels.

(d) Voluntary Associations

There is no voluntary association with which the local authority is in contact.

(e) Training of Staff

As yet no arrangement has been made to arrange training courses for new staff of the mental health service. It may be that as the 'relieving officers', who were the only persons skilled in this work, retire from the service the great deficiency of skilled and trained personnel will stimulate either the Government Department or the local authorities in concert to arrange for some necessary training.

Mental Illness

In 1958, 295 mentally ill persons were dealt with by the duly authorised officers. Of this number 275 were admitted to St. Mary's Hospital, Stannington, 240 as voluntary patients, in 25 instances certification under the Lunacy Acts was necessary, 5 died while under observation and 5 were discharged from the observation order. Of the remaining 20 mentally ill individuals investigated, 6 were admitted to other mental hospitals, 3 were admitted to a local general hospital and 11 patients were able to continue at home under supervision, receiving help from the home help service. The number of visits made in connection with mental illness totalled 672.

In view of the Royal Commission on mental illness and deficiency and the passage of the Mental Health Bill through Parliament, much more information is required for the local authority in relation to the problems that may face them in the field of mental health. Accordingly the duly authorised officers have obtained for me much greater detail of information concerning the patients who were admitted and treated in St. Mary's Hospital Stannington during 1958. The information is presented fully in four tables:—

Table I. Age and Sex Distribution of Mentally Ill Persons admitted to St. Mary's Hospital

Age				Males I	Females	Total
Under 21 years				4	2	6
21—45 years				41	46	87
46—64 years		• •		52	62	114
Over 65 years	• •	• •	• •	12	56	68
		Total		109	166	275

Table II. Particulars of Admissions and Other Relevant Data (St. Mary's Hospital).

		Males	Females	Total
a.	Admitted voluntarily	53	81	134
<i>b</i> .	Admitted under 3 day Orders			
•	(Section 20)	54	82	136
	Of these—	٠.	-	
	: Illtimately certified	8	12	20
	Maria and Installation	42	64	106
			2	100
	iii Discharged from Order	2	3	5
	iv. Died	2	3	5
c.	Admitted as certified patients	2	3	5
d.	Total patients admitted	109	166	275
	No. of these discharged in 1958	71	120	191
	Average stay of those discharged in			
	1958	56 days	54 days	54 days
	No. who died in 1958	20 days	2 Q	16
		0	O	10
e.	Total No. of Gateshead patients still	177.4	150	252
	in hospital 31.12.58	174	179	353

Table III. Frequency of Admission of Gateshead Patients to St. Mary's Hospital, 1958

Frequency of Admission

	Trequency of Hamission											
Admitted for	1	2	3	4	5	6	7	8	9	10 1	0+T	otal
Males	64	20	7	7	4	3	1		1	1	1	109
Females	76	29	24	13	4	3	4	4	1	2	6	166
Total	140	49	31	20	8	6	5	4	2	3	7	275

Table IV. Ultimate Diagnosis of Patients Admitted and Discharged from St. Mary's Hospital, 1958

	•			Males I	<i>Females</i>	Total
<i>a</i> .	Neurosis and psychoneuro	sis		4	9	13
b.	Schizophrenic psychosis			20	25	45
c.	Psychopathic constitution			7	1	8
d.	Affective psychosis			39	79	118
e.	Confused states			-	1	1
f.	Epileptic psychosis		• •	1	1	2
g.	General paralysis					-
h.	Other psychosis Organic brain disease			2	1	3
<i>c</i> .	Dementia			6	11	17
				79	128	207

In commenting upon these tables, one must emphasise the factor of age and the influence of sex, which is particularly marked in the old ladies over 65 years.

Another important matter to emphasise is that only 5 patients out of the 275 were certified before admission and that only 20 of the remaining 270 had to be certified while in hospital. This surely shows that the lack of certification under the Lunacy Acts in no way interferes with the administration of mental treatment so far as the Gateshead population is concerned.

The third table does bring out the proness of certain persons to mental breakdown, but those who are so affected must be indeed a very small section of the population. When one turns to the clinical aspect of the matter it is clear that what are called the affective psychoses, mainly manic depressive conditions in which the moods fluctuate between extreme excitement and the contrary depression and melancholia coupled with menopausal conditions account for the greatest number of admissions to hospital.

The next most important conditions are the schizophrenic group, in whom the outlook was at one time very hopeless, but which is now very much ameliorated thanks to modern methods of treatment by the appropriate physical and drug therapy.

Mental Deficiency

During 1958, 19 persons were ascertained to be defectives subject to be dealt with. 5 of these were over the age of 16 and were ascertained on leaving ordinary or special school and 14 (9 boys and 5 girls), were under the age of 16. Eight of these were children found ineducable at school, 3 had left special schools for educationally subnormal children and 2 had left ordinary schools. One other child was brought to notice otherwise in 1958. No children who were defective and yet not subject to be dealt with on any grounds came to light. This is because pressure of work in the school health department due to the poliomyelitis inoculation campaign prevented adequate consideration to the records of children of low I.Q. who were leaving at the end of ordinary school attendance. It is intended that priority will be given in 1959 to an effort to bring this most important knowledge up to date.

The defectives concerned referred to above as having been ascertained were placed under statutory supervision with one exception who was admitted to a hospital. At the end of 1958, the register contained the names of 29 boys and 28 girls, together with 208 men and 203 women, of whom 187 were in hospitals, 15 in places of safety, 3 under guardianship and 143 under statutory supervision. 120 defectives received voluntary supervision which meant that an effort is made to keep in contact with the high-grade and border-line patients in case they get into trouble with the law or otherwise prove to be socially inadequate.

In this area, 15 defectives are considered to be in need of hospital care, but there is urgency only in the case of 5 boys and one girl under the age of 16. 40 defectives in the area are considered to be suitable for training in occupation centres and 17 for training in an industrial centre. Actually 33 are already on the register of the occupation centre, but there is no industrial training, so that the elderly males numbering some 21 and upwards require some training facilities.

Occupation Centre

The valuable activities of the occupation centre were continued during 1958 under Miss McDermott and her staff of three assistant supervisors. Advantage was taken of a scheme for the in-service training of occupation centre supervisors sponsored by the National Association

for Mental Health in Newcastle by sending Mrs. Moore, Deputy Supervisor to take the two years training.

At the end of the year there were 33 names on the register, but the names were indeed as high as 38 at the end of January. The December figures included 13 boys under 16 and 6 over that age, together with 9 girls under 16 and 5 over that age. The presence of boys over 16 is not desirable but it has been tolerated because otherwise there is no centre available for them at the moment. It is possible that the stimulus given to local authority arrangements for mental health by the Royal Commission on Mental Illness and Deficiency will in time produce a training centre which will take the load of the older males. At the end of the year three of the children in attendance came from the Durham County area. One child who attended the centre died in hospital from pneumonia.

Transport by ambulance wagons designed for sitting patients is used to bring all the Gateshead children daily to the occupation centre. This worked very well indeed during the year under review.

Arrangements in the centre are not ideal, and there are considerable difficulties in the winter due to the rather draughty premises and the somewhat inadequate heating. The matter has had the attention of the Borough Engineer and it is hoped that the difficulties will at least be partly overcome in any future winter.

The daily curriculum includes the usual occupational centre activities together with school meals which are cooked on the premises. All the pupils take the dinners and the children under 18 years partake of the milk in schools scheme of the local education authority.

The children in attendance are regularly examined by the Deputy Medical Officer of Health, and such matters as immunisation against poliomyelitis and necessary dental treatment are arranged.

The health of the children has been on the whole good, apart from the usual winter coughs and colds. One mongolian child died in hospital and two others had treatment in hospital for acute chest infections.

The supervisor has asked that there should be provision made for additional teaching and for an additional intermediate class between the beginners' class and the middle age group, while it is recommended that the adult boys and girls should be separated as far as possible.

The building is in a very isolated position and seems to be much exposed to damage by the local vandals who have broken windows, pulled the gutterings off the roof and damaged the fencing and gates, besides pulling out the flowers in the little garden patches within the centre.

In December, the usual open day and Christmas celebrations were carried out and enjoyed by all concerned.

The following table reproduces the statutory return made to the Ministry of Health with reference to the position of mental defectives at the end of 1958:—

the one of 1950.	Under age 16		Age 16 and over	
	M.	F.	М.	F.
1. Particulars of cases reported during 1958 (a) Cases ascertained to be defectives "subject to be dealt with":— Number in which action taken on reports by:— (1) Local Education Authorities on children: (i) While at school or liable to attend school (ii) On leaving special schools (iii) On leaving ordinary schools (2) Police or by Courts (3) Other sources Total of 1(a)	6 2 — 1	2 1 2 —		
(b) Cases reported who were found to be defectives				
but were not regarded as "subject to be dealt with" on any ground				
Total of 1(a)—(d) inc	9	5	2	3
 2. Disposal of cases reported during 1958 (The total of 2(a), (b) and (c) must agree with that of 1(a) and (b) above) (a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e. at 1(a), number: (i) Placed under Statutory Supervision (ii) Placed under Guardianship (iii) Taken to "Places of Safety" (iv) Admitted to Hospitals 	9	5		2 1
Total of 2(a)	9	5	2	3
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e. at 1(b), number: (i) Placed under Voluntary Supervision (ii) Action unnecessary Total of 2(b)				
(c) Cases reported at 1(a) or (b) above who removed from the area or died before disposal was arranged				
Total of 2(a)—(c) inc	9	5	2	3
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1958 and admitted to (a) National Health Service hospitals			1	2
Total			1	2
s				

(i) Under Statutory Supervision		Under a	ge 16	Age 16 an	d over
(i) Under Statutory Supervision		M.	F.	M.	F.
(iii) In "Places of Safety"	(ii) Under Guardianship (including patients on	21	15	66	
(v) Under Voluntary Supervision	(iii) In "Places of Safety"	8	13		9
Total of 4(i)—(v) inc	Total of 4(i)—(iv) inc.	29	28	139	152
5. Number of defectives under Guardianship on 31st December, 1958, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Included in 4 (ii)) 6. Classification of defectives in the Community on 31.12.58 (according to need at that date) (a) Cases included in 4(i)—(iii) in need of hospital care and reported accordingly to the hospital authority:— (1) In urgent need of hospital care:— (i) "cot and chair" cases	(v) Under Voluntary Supervision			69	51
December, 1958, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Included in 4 (ii))	Total of 4(i)—(v) inc.	29	28	208	203
31.12.58 (according to need at that date) (a) Cases included in 4(i)—(iii) in need of hospital care and reported accordingly to the hospital authority:— (1) In urgent need of hospital care :— (i) "cot and chair" cases	provisions of Section 8 or 9, Mental Deficiency				
(1) In urgent need of hospital care: (i) "cot and chair" cases	(a) Cases included in 4(i)—(iii) in need of hospital care and reported accordingly to the hospital				
(ii) ambulant low grade cases (iii) medium grade cases (iv) high grade cases Total urgent cases 5 1 —— (2) Not in urgent need of hospital care:— (i) "cot and chair" cases ———————————————————————————————————	(1) In urgent need of hospital care:—	3		abree-man.	agi-representation
(iii) medium grade cases ————————————————————————————————————		2	4.	Market and the second	
Total urgent cases	(iii) medium grade cases				
(2) Not in urgent need of hospital care:— (i) "cot and chair" cases	(iv) high grade cases		-	anatonicore	ga.colon.com/
(i) "cot and chair" cases	Total urgent cases	5	1		
(ii) ambulant low grade cases (iii) medium grade cases (iii) medium grade cases (iv) high grade cases Total non-urgent cases 1 1 4 3 Total of urgent and non-urgent cases 6 2 4 3 (b) Of the cases included in items 4(i), (ii) and (v), number considered suitable for: (i) occupation centre (i) occupation centre (ii) industrial centre (iii) home training Total of 6(b) Total of 6(b), number receiving training on 31.12.58: (i) In occupation centre (including voluntary centres) (ii) In Industrial centre (iii) From a home teacher in groups (iv) From a home teacher at home (not in groups) Total of a see included in groups (iv) From a home teacher at home (not in groups)			1	1	2
(iii) medium grade cases			1	3	3
Total non-urgent cases		1			-
Total of urgent and non-urgent cases 6 2 4 3 (b) Of the cases included in items 4(i), (ii) and (v), number considered suitable for :— (i) occupation centre		and the same of th			****
(b) Of the cases included in items 4(i), (ii) and (v), number considered suitable for :— (i) occupation centre	Total non-urgent cases	1	1	4	3
(v), number considered suitable for :— (i) occupation centre	Total of urgent and non-urgent cases	6	2	4	3
(i) occupation centre					
(ii) industrial centre (iii) home training Total of 6(b)		12	7	6	15
Total of 6(b)				15	
(c) Of the cases included in 6(b), number receiving training on 31.12.58:— (i) In occupation centre (including voluntary centres)	(iii) home training	glike well habe sit		-	
training on 31.12.58:— (i) In occupation centre (including voluntary centres)	Total of 6(b)	12	7	21	17
(i) In occupation centre (including voluntary centres)	training on 31.12.58 :—				
(ii) In Industrial centre		12	7	6	5
(iii) From a home teacher in groups — — — — — — — — — — — — — — — — —			******		
groups)	(iii) From a home teacher in groups			patentine.	
Total of 6(c) 12 7 6 5	groups)				
	Total of 6(c)	12	7	6	5

Circ. 24/58—cases dealt with under Section 8 of the Education (Misc. Provisions) Act, 1948 — Nil.

12. Priority Dental Services

Report of Chief Dental Officer Treatment of Expectant and Nursing Mothers and Children under Five Years

All forms of dental treatment were carried out at the Authority's Health Centre. During the year, three dental attendants resigned, Miss Bagnall, Miss Smith and Miss Grass, with effect from 21.6.58, 14.8.58 and 8.10.58, respectively. Two other dental attendants, Miss Carter and Mrs. Tyrrell were appointed with effect from 21.7.58 and 1.9.58 respectively.

(a) Dental Inspection or Examination

The same procedure was used as in previous years, and of the number of expectant and nursing mothers examined 53.5 per cent. were found to be in need of treatment, a decrease of 11.7 per cent., and of these 40.4 per cent. accepted and received treatment, a decrease of 4.3 per cent.

The periodic inspection of children under five years was, as in the past, confined to those attending the Authority's Nursery Schools and Residential Nurseries, the remaining inspections being done for children brought to the clinic when in dental trouble. The number found to be in need of treatment was 85 per cent., a decrease of 3.1 per cent., and all of these received treatment of one kind or another.

(b) Dental Treatment

Facilities exist for a comprehensive dental treatment to be given. The figures given in the appended tables show an increase in the conservative work, a reduction in the number of extractions and full dentures supplied, but an increase in the number of partial dentures supplied, compared with last year. These differences are so comparatively small, that no observation of any particular trend can be made. In addition to the number of dentures fitted, 9 dentures were repaired and 2 relined.

(c) Arrangements for the Provision of Dentures

As in past years, all denture work is carried out in the Health Centre's Dental Laboratory, which is staffed by one senior dental technician in charge, and one senior dental technician.

(d) Facilities for X-Ray Examination

These facilities exist both at the Authority's Health Centre and at the Carr Hill Clinic, x-rays being taken as and when they are found necessary. The number taken during the year for these services was 23.

Tables recording treatment given to Priority Dental Services are appended.

A. Numbers Provided with Dental Care

,		camined	Needing treatment	Treated	Made dentally fit	
Expectant and Nursing Mothers Children under five years	• •	1,609 252	961 214	389 214	304 214	

B. Forms of Dental Treatment Provided

							Dentures Provided			
	Scal- ing and gum treat- ment	Fill- ings	Silver nit- rate	rowns or in- lays	Extr- actions	Gen. eral anaes- thetics	Full upper or full lower	Part upper or part lower	X-ray	
Expectant and Nursing Mothe		202	***************************************		1,085	202	199	68	23	
Children under Five years	10	28	4		508	223		-	-	

13. Orthopaedic Treatment

Report by Mr. A. E. Bremner, F.R.C.S.

22 othopaedic clinics were held at Greenesfield Health Centre during 1958.

New Cases

54 new cases were examined; of these 35 were school children who made 80 visits, and 19 were children under school age who made 31 visits.

Cases already under Treatment

In addition, 106 old cases made 160 visits to the orthopaedic clinic. Of these, 80 were school children who made 122 visits, and 26 were children under school age who made 38 visits.

A summary of the defects found is presented herewith.

•						
Congonital def	aata			New	Old	¥7''A
Congenital defe	2013			Cases	Cases	Visits
Webbed toes	• •		 	1	-	1
Talipes			 		1	1
Erb's Palsy		• •	 		1	1
Deformities	• •	• •	 	-	6	8

				1	8	11
Deformities of	feet					
Flat feet	• •		 	15	17	46
Adduction def	ormity		 	2	9	15
Eversion	• •		 		4	8
Calcaneal defo	rmity		 	1		1
Toe deformity	• •		 	1	4	5
Hypertrophy			 		2	3
Hallux valgus			 		2	4
Hallux rigidus			 	1		2
Metatarsus va	rus		 	1		4
Cavus deformi			 	1		1
Inversion of fo	oot		 	1		2
				23	38	91
				MAGN	Princeto	Bulleta

Discours of hou	as and injuta		New cases	Old cases	Visits
Diseases of bone T.B. spine Osteogenesis im Osgood schlatte	 perfecta	 • •		1 1 2 2	1 3 2
Nervous disease Sequelae to pol Diplegia Hemiplegia Cerebral palsy	io	 	1 1	9 1 3 13 26	12 1 10 20
Postural defects Torticollis Scoliosis Lordosis Kyphosis Poor posture		 	2 — 1 — 3	2 2 1 1 — 6	6 4 3 1 2 —————————————————————————————————
Miscellaneous Bow legs Knock knees Exostosis Shortening of l Intoed gait Pains in feet Old fracture Pseudo hypertr Deformity of fi Detached bone Nil abnormal	ophy of cal	 	2 1 1 - - 1 1 2 1 16 - 25	4 10 1 3 1 1 - - 6 - 26	10 17 4 5 1 2 1 1 2 3 32 78

Appliances

19 school children were recommended appliances; 19 were supplied.
1 pre-school child was recommended an appliance; 1 was supplied.

Alterations to shoes (valgus wedges) were carried out during the year as follows:—

Education				115
Maternity and	Child	Welfare		25

14. Health Education

This important duty of a health department is by no means neglected in Gateshead. Personal exhortation on the part of the health visitors is perhaps the most rewarding, so far as persons who are willing to learn are concerned. In the local clinics, the journal "Better Health" is regularly distributed to the number of 300 per month. A few copies of the "Family Doctor" are also sold and copies of the local "Guide to the Health and Social Services", published in 1956, are still being dis-

tributed slowly to interested persons who attend the welfare centres. Considerable use is made of health exhibition stands displaying posters emphasising matters of current interest. The Birthday Cards are of course used to remind mothers on the first birthday of each child of the importance of immunisation against diphtheria and whooping cough.

In 1958 a special effort was made, as part of the national campaign in November, to warn people of the danger of accidents, particularly burning accidents in the home. A brochure was got up by the Health Department giving local details, illustrations and common faults which lead to accidents in the home and the methods of preventing these. This booklet will be distributed to the number of 2,000. The cost of these booklets is entirely borne by the advertisement revenue accruing to the publisher.

In addition to these matters, ladies of the staff from time to time give talks to various interested bodies on matters connected with public health, home nursing and personal hygiene. Thus, 4 of the health visitors have lectured in courses sponsored by the British Red Cross and by Girl Guides.

Regularly each year student public health inspectors from the colonies tour the north-east areas, spending part of their time in Gateshead and various matters of local interest are demonstrated to them.

15. Problem Families

Report by Dr. Bainbridge

During the year there were 107 problem families living in the Borough. These problem families arose from the combination of their poor standards of hygiene, their poor housing conditions and their general inability to cope with the normal stresses and strains of modern family life. The scope of this problem can probably best be illustrated by quoting two cases.

Mrs. "A" wanted to have her fourth child at home, but the midwife having seen the house, decided that this was impossible. Mrs. A. was 23 years old and her husband was the same age. He was unemployed and in receipt of unemployment benefit and National Assistance. the house was visited it was found to be indescribably filthy. It consisted of 4 rooms, but only one of these rooms was in actual use; the other three were bare of furniture and the windows were blacked out. husband, wife and the three children, aged 3, 2 and 1 years, were all sleeping in one bed, which was in fact covered with a heap of filthy rags. On the financial side it was found that the couple were head over heels in debt, owing about £80 to various shops. It was quite obvious that they had very little idea of managing their affairs efficiently, and that as soon as they got any money it was frittered away. The home helps immediately began to clear up the house, and one room was prepared for the forthcoming confinement. We were able to obtain, from one of the charitable organisations, a small grant to buy some essentials for the house. Everything in the way of cleaning materials had to be taken into the house. The W.V.S. were able to help with providing them with essential furniture, blankets and clothes for the children. Their finances were managed for them and Mr. and Mrs. A. were taught how to spend their money more wisely. Over a period of seven months all the outstanding debts were paid off. As soon as Mr. and Mrs. A. saw how much was being done for them they co-operated. Mrs. A. was taught the rudiments of house-keeping and Mr. A. obtained a job which he managed to hold down. Over a period of months there was a marked improvement in this family.

Mr. and Mrs. 'B' were reported by the Inspector of the N.S.P.C.C. They were both in their early twenties and had three children under the age of 5. They were living in one sub-let room and were about to be evicted. When they came to our notice, 'Mrs. 'B' had just come out of hospital, having given birth to a stillborn child one week previously. incredibly dirty, the furniture consisting of a bed which was falling to pieces and a few pieces of junk. The couple had been married for five years, and the wife seemed to have no idea how to cook a hot meal, how to shop or how to spend or use her money. It appeared that the couple were in debt to the tune of £60. The only thing to do in the first instance was to remove the three children to one of the local authority's residential The mother was obviously in very poor health and a period of convalescence was arranged for her. We were able to stay their eviction. Once again a great deal of rubbish had to be removed, and with the help of the Children's Department and various organisations Mr. 'B' was helped to redecorate the room, and some basic pieces of furniture were obtained for them. When Mrs. 'B' returned home it was decided to try and teach her the rudiments of house management. A home help went every day and showed her how to clean, how to cook and how to lay out her money wisely. Over a period of weeks the children were restored one by one, but it took over six months to clear off the debt. After about three months we were able to cut down the time the home help spent with Mrs. 'B', and she was encouraged to care for herself. Eventually we were able to get the family rehoused, and at this juncture it seemed to be a good time to let them manage their affairs for themselves. So far they appear to be managing quite well.

Obviously a great deal of time and money has to be spent on these families out of all proportion to their numbers, and it may be asked "Why do it?." Apart from the obvious humanitarian view of trying to keep the family together, there is the very important aspect that if the family cannot be re-educated and kept together then we, through our local authority children's department, must step in and take these children into care. The cost of maintaining children in care varies with the age of the child and with the type of establishment it enters. On last year's figures young children cost the local authority £11 19s. 9d. a week, and the overall cost of having children in care either in a nursery or boarded out in foster homes worked out as an average of £5 10s. 0d. so that in those families where several children are involved the cost to the local authority is enormous.

It must be realised that the job of looking after problem families is extremely difficult, because we are only allowed to help those families who agree to be helped, and in many cases assistance is peremptorily rejected. Again, while the two cases quoted sound as if we have been successful it is much too soon to claim them as successes, for we know from experience that many of these families who have been helped relapse after varying periods of time, so that constant supervision is required, and this needs very close co-operation between all the agencies run by the local council and the voluntary agencies. I am very pleased to report that in this area I think the relations between all the different branches is exceedingly good.

C. LOCAL EXECUTIVE COUNCIL

(Part IV of the National Health Service Act)

Through the kindness of the Secretary of the Local Executive Council, I am able to furnish the following information about the Council Service for the financial year ending March, 1959:—

1. General Medical Service

109,730 persons were registered on the lists of doctors in the area, which represents a decrease of 299 on the corresponding figure of last year. Altogether there were 89 doctors on the medical list, of whom 44 reside in and have surgeries in Gateshead. Only 40 of these are fully active.

The average number of persons on the resident doctors' lists is 2,707 this number including full-time assistant doctors. The area continues to be classified as "open" for the purpose of admission of new doctors to the medical list.

In the obstetric list, 34 resident doctors of the Borough have been included and 971 women received maternity medical attention during 1958. In 571 cases the doctor was present at the confinement and 844 patients received the full maternity service. In 127 cases either ante-natal care, including attendance for miscarriages or post-natal care only was given.

The amounts paid to doctors during the year ended 31st March, 1959, were as below:—

				£
Capitation payments				96,742
Additional "loadings"				22,722
Temporary residents				776
Maternity medical services			w v	6,814
Initial practice allowance				
Supplementary Annual Pay			4 7	369
Balance Payments for Previ	ous Y	ears		16,265
				143,688

2. Pharmaceutical Services

There were 28 chemists' shops (20 chemist contractors) under agreement to dispense medicine, drugs and scheduled appliances, and 4 contractors supplying surgical appliances (2 situated outside the Borough).

The total payments to chemists in the year (including rota payments) was £140,214, and there were 485,175 prescriptions. The average cost per prescription was 6/8.33d. (Jan.—Dec., 1958). The amount paid by patients amounted to £24,485.

3. Dental Services

There were 22 dentists on the list. 3 dentists each employed one full-time assistant. The cost of this service was £75,908. in addition to £17,823 paid directly by the patients.

4. Ophthalmic Service

Seven ophthalmic medical practitioners and 27 ophthalmic opticians were under agreement with the ophthalmic services committee to test sight and dispense glasses. Two dispensing opticians are also under contract with the Council. Four of the ophthalmic medical practitioners, 16 of the ophthalmic opticians and one of the dispensing opticians practise outside the Borough. The cost of sight testing amounted to £9,278 as against £9,160 in the previous year.

During the year, 11,554 pairs of glasses were actually supplied as follows:—7,497 were supplied with a single pair of glasses, 3,016 with bifocal glasses, 757 two pairs of glasses and in 284 cases single lenses were supplied to each pair.

68 persons have applied to opticians to have glasses, previously supplied to them under the National Health Service, repaired or replaced In 31 of these cases, the Ophthalmic Services Committee was satisfied that the breakage or loss was due to personal carelessness and no charge fell on public funds, apart from 5 cases which were allowed on the grounds that payment would involve the applicant in financial hardship. 779 children applied for replacement or repair of their glasses, which was approved in 337 cases. During the year, the Committee decided to use its powers under the Regulations to recover from the Local Education Authority the cost of replacement or repair of the glasses of 442 school children where there was evidence of lack of care on the part of the pupil.

The amount paid from public funds for the supply, repair and replacement of glasses amounted to £12,887, of which sum £408 was recovered from the Local Education Committee. Charges paid by patients amounted to £12,419.

1,091 sight tests were given to children of school age and under at the Greenesfield Health Centre by the Ophthalmologists, Mr. H. Vernon Ingram and Mr. J. S. Arkle.

D. OTHER HEALTH SERVICES

1. School Health Service and Clinics

In Gateshead, the treatment arrangements for children of school age and under have been unified so that minor ailments, ophthalmic, orthopaedic, dental and artificial sunlight treatment is available to children under 15 years of age.

For the purposes of making the survey of the local health services comprehensive, the following statistics of the annual report on the school medical services are included. School children on the register at the end of the year numbered 17,159. Of these, 4,957 were submitted to routine medical examination on entrance, at 11 years of age, and on leaving. 51.5 per cent. of the parents of children examined by routine were present at the inspection. The nutrition of the children examined at school medical inspection was assessed as good in 98.87 per cent. of the children, a satisfactory figure for Gateshead. 1,411 children attended the minor ailments clinic, 819 school children were prescribed spectacles for errors of refraction, but the waiting list for ophthalmic investigations at the end of the year numbered 46 names. The orthoptic service, which was started in 1948, continued during the year, when 317 children received treatment.

At the end of the year there were three special schools under the Local Authority, the Joicey Road Open Air School with 138 children, the Cedars Special School for Physically Handicapped Children with 31 pupils (16 resident), and the Hindley Hall Special Residential School for Educationally Subnormal Children with 46 pupils.

2. Gateshead Dispensary

In the case of the Gateshead Dispensary, a clinic for the treatment of psychosomatic conditions has been carried on by Dr. J. C. Hall, since the appointed day under the National Health Service Act. I am indebted to Dr. Hall for permission to include the following extract from his report on the work of the clinic:—

"No. of Sessions								
Day sessi Evening		• •			4 •		762 343	
							1,105	
Gas sessi Hypnosis		 1S					100 435	
Patients treated						Men	Women	Total
No. of patient	ts on bo	oks d	uring tl	he year		22	32	54
Discharges New patients	• •					8 8	10 16	18 24
New Patients						Men	Women	
Anxiety						3	10	
Drug addict Tic	• •				\$P		$\frac{1}{2}$	
Bladder dysfu	nction					1		
Stammer						1	dissipation in the same of the	
P.o.W Depression						1	1	
Psoriasis	* *				• 0	2		
Asthma Bronchitis			* 1			***************************************	1	
			• 1	, .	• •			
						8	16	

Discharges

Anxiety		 	 	2	4
Drug addict		 	 		1
Tic		 	 		1
Stammer		 	 	1	
P.o.W		 	 	2	
Obsession		 	 	1	
Migraine		 	 • •	1	
Enuresis		 	 	1	
Eczema		 	 		1
Depression		 	 		1
Bronchitis		 	 		1
Traumatic ne	urosis	 	 	Allerson Foods	1
				8	10

The patients on the books were divided into the following categories:—

					Men	Women	Total
Epilepsy				 	1		1
Anxiety				 	6	19	25
Obsession				 		3	3
Stammer				 	3		3
Migraine				 	1	2	3
Masturbation				 	1		1
Asthma				 	2	1	3
Hysteria			• •	 		1	1
<u>P</u> soriasis				 	2	_	2
Eczema			• •	 • •		1	1
Trauma				 	3		3
Depression				 		2	2
Tic	• •			 		1	1
Bronchitis	• •			 		1	1
Bladder dysfur	nction			 	2		2
Smoking			• •	 	1		1
Drug addict	• •	• •	• •	 • •		1	1
					22	32	54
					-		

The most encouraging results were seen in cases of asthma, migraine, eczema, anxiety and stammer.

Asthma: One woman completely relieved of attacks.

Migraine: One man cured of attacks, and one women very much relieved.

Eczema: One woman cured. Skin rash disappeared. Anxiety: Two women relieved of their symptoms.

Stammer: One man very much improved.

The drug addict, a woman, ceased to attend for treatment. The obsessional cases did not respond to treatment, nor did the cases of depression."

PART III

PREVENTION AND TREATMENT OF DISEASE

A. INFECTIOUS DISEASES

The following summary presents the information relating to the prevalence of infectious diseases as known to the Health Department in 1958:—

Diseases		Cases notified or other- wise known	Removed to isolation Hospital	Corrected No. of Cases	Deaths	Deaths in Isolation Hospital
Notifiable						
Scarlet fever		98	44	95		
Whooping cough		126	9	125		
Diphtheria				AMERICAN		-
Measles		539	6	536		-
Pneumonia		256	202	253	57	15
Meningococcal infection		14	12	14	3	3
Acute poliomyelitis						
paralytic \		1		1		
non-paralytic \(\)			3			
Acute encephalitis:						
Infective		7	7	8	1	1
Post-infective		-			-	
Dysentery		65	13	64		
Ophthalmia neonatorum						
Puerperal pyrexia		17		17		
Enteric fever						
Erysipelas		12	5	12		
Scabies		52		52		
Food poisoning		20	7	20		
Malaria		1	i	1		
Tuberculosis:		101	70	4.40	10	0
Respiratory		121	73	119	19	9
Meninges or C.N.S.	• •	1	1	10		
Other		13	9	13	2	
Non-notifiable						
Pemphigus neonatorum						
Clandylan farran		2	2		agin, na.co.	
Chiefron more	• •	13	2 4			
Mariana	• •	13	1			
Infactive hometitie	• •	23	3		Security of the	
D - 1 - 11 -	• •	<i>L. J</i>				
Gastro-enteritis	• •	44	44		3	
Dysentery carriers	• •	35			3	
Salmonella carriers		10				
Ringworm:		10				
Scalp		1				
Body	• •		-			

In 1958 there were 1,330 verified cases of notifiable infectious disease in Gateshead, as compared with 3,543 in 1957. The great difference is due to the relative absence of measles during the year.

The principal features of the infectious diseases during 1958 were a small outbreak of tracheo-bronchitis and bronchiolitis in infants in the last two weeks of 1957 and the first three weeks of 1958, a prevalence of chicken pox in April, some prevalence of dysentery in June and evidence of the beginning of a measles epidemic in mid-November.

1. Notifiable Diseases

Scarlet Fever

This disease remained of low incidence and was relatively non-virulent. In hospital, complications were exceedingly rare.

Whooping Cough

Although the notifications, 125, showed a little increase on the 99 of the previous year, this disease is gradually coming under control as immunisation is extended to most children at the end of the first year of life.

The number of notifications received is, of course, an under-statement and probably the true number of cases would be three times the number notified.

Diphtheria

For the seventh successive year no true cases of diphtheria came to light, the last case being anterior nasal diphtheria in 1951.

Measles

At the end of 1958, a measles epidemic was obviously on the way. During the last weeks of the year the notifications were as follows:—

Week	endi	ng 18th October	 	1
,,	,,	25th ,,	 	3
,,	,,	1st November	 	7
,,	,,	8th ,,	 	3
,,	,,	15th ,,	 	12
,,	,,	22nd ,,	 	42
,,	,,	29th ,,	 	27
,,	,,	6th December	 	69
**	,,	13th ,,	 	49
,,	,,	20th ,,	 	92
,,	**	27th ,,	 	64

The epidemic continued in 1959 and reached its peak in the week ending 7th February, with 151 notifications. The fluctuation in the early weekly incidence of epidemic measles appears to be due to the lengthy incubation period, and there was, for obvious reasons, some decline of prevalence during the Christmas school holiday season.

Pneumonia and Influenza

There was no visitation of influenza in 1958 and the increased incidence of pneumonia was met with almost entirely during the month of January. Both the notifications and mortality figures quoted in the report refer to all the cases of pneumonia that came to the notice of the health department, whether they are primary or secondary to such conditions as chronic bronchitis.

Meningococcal Infection

The number of cases of true meningococcal infection that came to light represents the average annual experience of this disease with the occasional very acute mortality from meningococcal septicaemia.

Poliomyelitis

In 1958, this disease was represented by only one true case of paralytic poliomyelitis, a girl of 17 who made a complete recovery from paralysis involving the shoulder girdle and back.

Encephalitis

8 cases of virus meningo-encephalitis were received into Sheriff Hill Hospital, and all except one recovered. The exceptional case was a Mongolian boy of 13 years, who was admitted moribund to hospital and died within fifteen minutes. The remaining cases were four males aged respectively 1, 34, 45 and 50 years, and three females aged 1, 19 and 27 years.

Dysentery

Only 65 cases were notified during 1958, a considerable reduction on previous experience, especially on 1957, when 278 cases came to light. The disease was of sporadic incidence throughout the year, except that in June there was a very sharp outbreak involving the Open Air School, which has a population of 138, and a staff of 7. Altogether 12 children and one teacher were detected as confirmed cases, while 4 children and the cook were convicted as carriers.

114 specimens of faeces were obtained from this population and contacts of the school children were also asked to submit specimens, with the result that three more actual cases were detected in the community and eight carriers. With the closure of the school after the summer holiday the epidemic came to an end. The administrative action taken to control the prevalence was to enforce a very strict hygiene of the toilet, combined with the use of antiseptic lotions and the cleansing of the water closets and other appliances with a disinfectant.

Enteric Fever

This disease was absent from the area in 1958.

Erysipelas

Some 12 cases of erysipelas came to light, and there was one death, apparently due to the coincident disease of myocardial degeneration.

Scabies

Scabies, a notifiable disease in this borough, showed a slight increase of prevalence with 52 cases coming to light. Treatment followed the usual lines.

2. Non-notifiable Disease

Sporadic cases of glandular fever, chicken pox and infective hepatitis kept turning up during the year. The incidence of infective hepatitis is one which has now gone on for some years, and not very much is

known as to how it is spread. Enquiries are difficult because not all the cases are brought to our notice, information being derived from the school attendance officers and from admissions to the isolation hospital.

Non-specific gastro-enteritis was ascertained in 44 patients who were removed to the isolation hospital. One of these, a man of 76 died, and the post-mortem findings revealed pneumonia with gastro-enteritis as a contributory cause. There were in addition two deaths in the Borough in which gastro-enteritis was mentioned as a contributory cause, one a man of 68 years who suffered from pernicious anaemia and cardio-vascular disease and the other a pregnant woman, who died from circulatory collapse after placenta praevia.

In the last weeks of December and the first weeks of January some 38 children from the Borough under two years of age were admitted to Sheriff Hill Hospital suffering from pneumonia or bronchitis and there were similarly 18 admissions to the Children's Hospital, while six other children were notified as suffering from pneumonia at home. The illness took the form of bronchiolitis of an obstructive type often associated with signs of pneumonia, and in hospital most of the cases rallied under treatment with penicillin. Specimens taken from the throats and noses of the infected children were investigated by the virologist of the Public Health Laboratory Service, with negative results.

Sickness Claims

The year began with a fairly high level of sickness claims, 950 per week, gradually falling during the first quarter of the year to 600, during the second quarter of the year to some 400 and rising again in the last quarter to an average of 500 per week.

3. Supervision of Contacts

Some 35 dysentery carriers and 10 salmonella carriers were supervised during 1958. Three dysentery carriers and one salmonella carrier who handled food were suspended from work, their financial loss being compensated by national insurance sick benefit plus an allowance from the corporation sufficient to maintain the average level of weekly income. One dysentery carrier among the staff of the open air school was dealt with in this manner.

Three contacts of a case of typhoid fever that occurred in another district and one passenger on a ship which landed at Liverpool with a case of smallpox on board were supervised and found to be uninfected.

An interesting occurrence concerned the disposal of an infected carcase in a local knackers' yard. This animal sickened on a farm in Northumberland and a farmer started treating the animal himself with penicillin, with the result that the symptoms were considerably modified The animal died and the carcase was removed to the knackers' yard in Gateshead. Post-mortem examination by a local veterinary surgeon showed the usual enlargement of the spleen. Samples of blood taken verified the diagnosis of anthrax and it was then necessary to take some action regarding the worker who skinned and otherwise handled the

carcase. He was given a large prophylactic dose of penicillin and kept under observation for a week. Fortunately no manifestation of the disease was seen.

Infestation and Uncleanliness

Infestation of the body is now in Gateshead limited to the aged senile patients who are living alone and in need of care and attention. These, of course, are very few in number and usually have to be removed to the welfare hostel for the necessary action.

Infestation of the scalp only comes under official notice in connection with school children, although it is known that a large number of adults admitted to hospital are also infested with head lice. Remedial care in school children is mainly by the application of the insecticidal preparations such as Lorexane.

The prevalence of bed bugs is now probably at a minimal and official activity is mainly connected with disinfestation of infested furniture of tenants who are about to be rehoused from slum clearance dwellings into new corporation houses. In appropriate cases the furniture is loaded into a van and exposed to a gaseous disinfection. A charge is now made for this service. Broadly speaking, the experience of the disinfestation workers is that the D.D.T. and similar preparations are tending to become less effective as the insects develop some kind of resistance. Further newer preparations such as Malathion are being tried with promising results.

B. SUSPECTED FOOD POISONING AND SALMONELLOSIS

In accordance with regulations the following return was made to the Ministry of Health:—

- 1. Local Authority: Gateshead County Borough, Year: 1958.
- 2. (a) Notifications (corrected), as returned to the Registrar General:

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
(b) Cases otherwise asce	ertained:			
Cases Carriers	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
(c) Fatal cases:	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
3: Particulars of Outbreaks:	No. of Out		— No. of cases ified Otherwis	
Agents identified Agents not identified			ascertained — – – — –	d
4. Single cases:	No. of cas Notified Oth ascer		tal No. of cases	ς.
Agents identified Agents not identified			-	-

5. Salmonella infection not food-borne

Calmonalla		Outbreak	s No. of Cas	Single (of Cases		
Salmonella (type)		Family	Other (Ou	atbreaks)	Cases	symplom- less excretors.	
Typhimurium		3		8	4	12	7
Stanley		1		2		2	
Bareilly					3	3	
Heidelberg			-		1	1	
Thompson					1	1	
Montevideo			-		1	1	
St. Paul							1
Dublin	• •						1
		4		10	10	20	9

Salmonella Infections

In Gateshead the main problem of alimentary infection in recent years has been shared between dysentery and salmonella infections. It appears that both diseases are spread by the same route and in the same manner. It is very rare indeed that any article of food has been incriminated in a salmonella outbreak.

The following table shows the prevalence of salmonella infection in Gateshead over recent years, Salmonella St. Paul being a newcomer in 1958:—

Salmonella Infections in Gateshead (1936-1958)

P=Patients, C=Symptomless Excretors (Deaths in parenthesis)

Τ	A	В	L	E	1

1936-40	I ABLE I	Totals												
S. Typhimurium 9(1) — 1 — 89(4) 40 49(2)* 26 51 29 199 95 S. Thomson . — — 14 7 3 3 3 3 — 20 10 S. Stanley — 3 — 2 — 5 — S. Montevideo . — 1 — 1 — 1 — 1 — 4 — S. Anatum . — — 1 — 1 — 3 3 4 4 7 S. Newport . — — 1 1 1 — 1 1 2 2 S. Bareilly . — — 1 1 1 1 2 3 — 5 3 S. Dublin — — 2 — — 1 1 1 — 3 S. Rubislaw . — — — 1 — 1 — 3 S. Rubislaw . — — — 1 — 1 — 2 1 — 3 S. Rubislaw . — — — 1 — 1 — 1 — 3 S. Cholera Suis . — — 1 — 1 — 2 1 — 2 1 S. Cholera Suis . — — 1 — 2 1 — 2 1 S. Enteritidis . — — 2 1 2 3 4 4 S. Derby — — 1 2 — 1 2 S. Virchow . — — 1 2 — 1 2 S. Virchow . — — 1 3 — 1 3 S. Paratyphy Var. Java — — — 1 1 1 1 7 — 14 17 S. San Diego . — — — 1 1 — 1 S. Heidelberg . — — — 1 1 — 1 S. Bredeney . — — — 1 3 4 13 4 S. Bredeney . — — — 1 1 — 1 S. St. Paul — — — — 1 — 1		1936	5-40	194	1-45	1940	5-50	1951	-55	195	6-58			
S. Thomson	Salmonellosis	Р.	<i>C</i> .	Р.	C.	<i>P</i> .	C.	P.	C.	<i>P</i> .	C.	P. 6	C.	
	S. Thomson S. Stanley S. Montevideo S. Anatum S. Newport S. Bareilly S. Dublin S. Rubislaw S. Bovis Morbific S. Minnesota S. Cholera Suis S. Enteritidis S. Derby S. Virchow S. Cubana S. Poona S. Paratyphy Van Java S. San Diego S. Heidelberg S. Bredeney	cans —		general de la constante de la		14	7 — 1 1 2 — — —	3 - - 1 - 1 1 2 1 1 1 1	$ \begin{array}{r} 3 \\ \hline 3 \\ \hline 2 \\ \hline 1 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 2 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 2 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 3 \\ \hline 2 \\ \hline 3 \\ \hline $	3 2 1 3 1 3 - - - - - 1	- - 4 1 - - - - - - - - - - -	20 5 4 4 2 5 — 1 1 2 1 4 1 1 1 1 1	10 -7 2 3 -1 -4 2 3 -2 17 -4	
				2		10(4)	51	79(2)	60	80	44	280	155	

^{*}These were hospital cross-infections. Deaths from tuberculous meningitis and poliomyelitis respectively.

There was one death associated with salmonella infection during 1958, an old age pensioner of 84 years who had recovered from the infection, but who had nevertheless died from heart disease.

Salmonella Typhimurium Infection

There were three family outbreaks involving 8 cases and 4 single cases of infection by this organism.

A child 'L.B.' sickened on the 16th June with enteritis, which was at first treated symptomatically, but later on a sample of faeces was examined and was reported on the 30th June to contain S. Typhimurium. In the household there were four other children aged from 14 weeks to nine years, and the two parents. All this household, when sampled, yielded salmonella typhimurium, but only the father and a three-year old child and baby of four weeks seems to have had any symptoms. The father's symptoms began a week before the patient whose illness was rapidly diagnosed. It is not known how the infection reached the household, but the time intervals suggest that having been intruded the organism was passed from one person to another.

Another 2-year old child sickened on the 17th June with abdominal pain and diarrhoea. His mother sickened on the 24th June with the same symptoms. Samples of faeces from both patients revealed S. Typhimurium on the 2nd July, 1958. The other member of the household, the father of the child, was uninfected. These patients went on to be carriers for some time.

Still another 2-year old child sickened on the 6th August, 1958 with a high pyrexia which lasted several days. He also had pains in his abdomen and was removed to hospital, where a sample of faeces taken on the 12th August was subsequently reported to contain S. Typhimurium. This patient's family consisted of the two parents and five sisters and three brothers, aged from 2-20 years. All of these submitted specimens of faeces, with the result that a sister aged 20 was found to harbour S. Typhimurium. Another sister, aged 8 years, was found to habour S. Dublin and another sister, aged 2 years, Sonne Dysentery organisms. In this family the same food was consumed by the whole household, but only the patients would admit any symptoms of gastro-intestinal irritation.

An old lady of 84 developed abdominal pain and vomiting on the 9th February. Some days later there developed diarrhoea and she was sent to hospital where her faeces were found on the 18th February to contain S. Typhimurium. The patient died from myocardial degeneration and senile arterio-sclerosis. Her relatives, a daughter, a son-in-law and a grandchild all submitted specimens which were negative.

A three-year old boy became ill with abdominal symptoms on the 25th July. Samples of faeces were reported positive for S. Typhimurium on the 1st August. The boy was an only child living with his parents, both of whom were symptom free and produced negative faeces.

A one-year old child developed fever, abdominal pain and sickness on the 20th August. He was admitted six days later to the isolation hospital, where his faeces were reported on the 28th August to contain S. Typhimurium. One other child, an infant of five weeks, also had gastro-intestinal symptoms. Samples were obtained from the grand-parents, the parents and the baby and all five showed the presence of S. Typhimurium in the faeces.

A boy of 6 years sickened apparently with tonsillitis on the 3rd October, and became fit in a week. His fever recurred on the 11th October and continued to the 14th October, when he developed meningeal irritation and was sent to hospital. There he presented looseness of the bowels and his faeces on the 17th October were reported to contain S. Typhimurium. He rapidly recovered under treatment. This boy lived with his parents and an older brother of 17 years, all of whom, when sampled, were found to be free from infection.

Salmonella Stanley

An 11-year old girl sickened on the 6th August. A sample of faeces was reported on the 20th August to contain S. Stanley. This girl lived with her parents and two sisters, aged 8 years and 17 years. They were all symptomless except the girl of 8, who had slight diarrhoea on the 20th August. The father, a meat porter, was found to be carrying S. St. Paul and the 8-year old child was infected by S. Stanley. There seemed to be some suggestion of this family having been infected by a version of the "hot-dog," i.e. a bun dipped in hot gravy.

Salmonella Bareilly

A 48-year old housewife suffered from abdominal pain and diarrhoea for some three weeks prior to calling the doctor on the 19th May. Faeces samples from the household, consisting of the patient, her husband and son, were examined, but only the patient was found to be infected, the organism in her case being S. Bareilly.

A man aged 56 years became ill with stomach cramps, vomiting and diarrhoea on the 8th May. He was admitted to a general hospital on the 12th May, and the sample of his faeces was found to contain S.Bareilly. He was transferred to the infectious diseases hospital, where he recovered after intravenous infusion of fluids. Faeces samples from the contacts, namely the man's wife and three children proved to be negative.

A 3-year old child became ill with sickness and diarrhoea on the 25th July, and was admitted next day to hospital. Her faeces were reported on the 30th July to contain S. Bareilly. The other members of her family, namely the father, mother and four children, all submitted specimens of faeces which were reported to be free from pathogens.

Salmonella Heidelberg

A woman of 22 years became ill and her own doctor called on the 16th June treated the patient symptomatically, but later on a sample of faeces was reported on the 29th June to contain S. Heidelberg. The patient lived with her mother and her brother, both of whom submitted specimens which were negative.

Salmonella Thomson

A man of 63 years sickened on the 26th August, with abdominal pain and was sent to a general hospital as a possible acute abdomen. A diagnosis of diverticulitis was made and the patient was admitted to the ward, where some looseness of the bowels was noted and the faeces sent for bacteriological examination. On the 4th September the faeces were reported to contain S. Thomson, somewhat to the surprise of the surgical staff. The patient's wife and a lodger, aged 22, both submitted samples of faeces which were found to be negative. There was no indication of the source of infection in this case.

Salmonella Montevideo

An infant of five months sickened on the 3rd November with vomiting and diarrhoea which lasted until the 7th November, when the patient was sent to the isolation hospital. A faeces examination yielded S. Montevideo. The child recovered from his symptoms under treatment but continued to be a convalescent carrier for some time.

C. TUBERCULOSIS

Report of Dr. S. D. Rowlands, Consultant Chest Physician, Gateshead

Chest Clinic

The Chest Clinic is now situated at Whinney House Hospital, but for the whole of the year was only in temporary quarters while a new clinic is being built in the old recreation room of this hospital. Transfer to these new quarters is expected to be made in early 1959.

At the old clinic at Greenesfield House, a 100 mm. X-Ray Unit was installed and began working in March. This is staffed by one clerk/radiographer, employed full-time by the Local Authority, and one part-time nurse/radiographer on loan from the Medical Research Council, whose main duties are to further enquiries into contacts of known chronic infectious cases.

During the year, 513 sessions were held at the Chest Clinic at Whinney House Hospital and 211 at the Greenesfield X-ray Clinic, during which 3,178 x-ray films were taken and of these 472 were referred to the Chest Clinic for further examination.

At the Chest Clinic 1,828 new patients were seen (excluding patients attending for x-ray only) and the total attendance was 8,294.

1. New Cases

During 1958 there was again a slight reduction in the number of new cases of tuberculosis diagnosed, but nothing like the reduction noticed from the previous year.

During the year 132 new cases of tuberculosis were added to the register (121 pulmonary tuberculosis and 11 non-pulmonary tuberculosis) a reduction of 11 on the previous year.

A great deal of the work of the chest clinic is now devoted to the investigation and treatment of non-tuberculous chest diseases and many of this type of case are now admitted to our hospital beds.

New notifications with rates during the past decade are as follows:—

		No. of	new cases	Incid per 1,000	A 11	
Year	P.T.	O.T.D.	Total	P.T.	O.T.D.	All forms
1949	250	30	280	2.17	0.26	2.43
1950	220	41	261	1.9	0.35	2.25
1951	227	38	265	1.97	0.33	2.30
1952	243	28	271	2.12	0.24	2.36
1953	255	42	297	2.24	0.37	2.61
1954	200	25	225	1.76	0.22	1.98
1955	161	28	189	1.42	0.24	1.66
1956	236	20	256	2.1	0.17	2.27
1957	125	18	143	1.12	0.16	1.28
1958	121	11	132	1.11	0.1	1.21

There has been a satisfactory reduction in the number of known cases of infectious disease in the town, all of whom are kept under a specially careful review. At the end of the year, as far as can be ascertained, there were 79 cases of pulmonary tuberculosis who had been sputum positive during the year, many of whom had been converted to negative as a result of treatment. Of the chronic infectious cases there are now only 33 remaining positive, a reduction of 18 on the previous year. 586 other notified cases, who at one time had a positive sputum, are now negative. Of the known infectious cases, 33 were still in hospital at the end of the year.

2. Contacts

A much greater effort was made during 1958 to round-up and x-ray contacts of notified cases. With the help of Miss Wilson, S.R.N., who is employed by the Medical Research Council and seconded to Gateshead to promote this work, there has been a big increase in the number of contacts examined. These patients are referred to the 100 mm. x-ray unit at Greenesfield in the first instance.

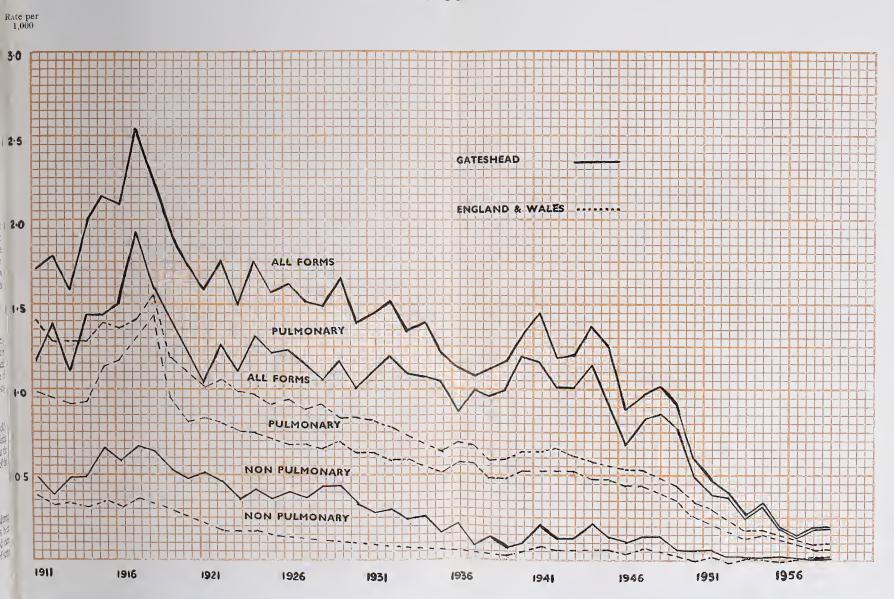
During the year 3,023 contacts were seen (665 new and 2,358 old). Of these, 13 (4 males, 4 females and 5 children) were found to be suffering from active tuberculosis; 28 others were still under observation at the end of the year, the remainder being apparently free from evidence of the disease.

3. Deaths

There was an increase of 3 deaths from tuberculosis recorded during the year, but the overall marked decline in the death rates has been maintained. Modern chemotherapy can now readily control and cure the great majority of cases and many of the deaths are the result of some intercurrent disease and not attributable solely to tuberculosis.

County Borough of Gateshead TUBERCULOSIS

DEATH RATES per 1,000 population 1911 - 1958





During 1958 the Registrar General's return of tuberculosis deaths in Gateshead was 23:—

Pulmonary tuberculosis	Non-pulmonary tuberculosis
Males 18	Males 1
Females 4	Females —
22	1
The second secon	

The death rates for Gateshead were :-

Pulmonary tuberculosis . . . 0.2 per 1,000 Other tuberculous diseases . . 0.009 per 1,000 Total (all forms) 0.2 per 1,000

These rates compare with those for England and Wales for 1958 as follows:—

Pulmonary tuberculosis .. 0.089 per 1,000 Other tuberculous diseases .. 0.011 per 1,000 Total (all forms) .. 0.1 per 1,000

The following table shows the total deaths and death rate for the past ten years:—

		T	otal Deaths	per 1,000	A11	
Year	P.T.	O.T.D.	Total	P.T.	O.T.D.	All Forms
1949	91	10	101	0.79	0.087	0.87
1950	64	11	75	0.55	0.09	0.64
1951	47	11	58	0.41	0.09	0.5
1952	45	4	49	0.39	0.03	0.42
1953	29	3	32	0.25	0.02	0.27
1954	38	4	42	0.33	0.035	0.36
1955	23	2	25	0.203	0.017	0.220
1956	18	2	20	0.16	0.017	0.177
1957	19	1	20	0.171	0.009	0.18
1958	22	1	23	0.2	0.009	0.209

The age distribution of new cases and deaths is given in the appended table:—

			Ne	w Cases		Deaths							
Age		Pulmonary		Non-puli	nonary	Pulmor	nary	Non-puln	nonary				
Periods Periods		Males	Females	Males	Females	Males	Females	Males	Females				
0-1		1											
1-5			1										
5-10		1	2										
10-15		3	4		1								
15-20		2	10						an an interest of the				
20-25		12	14	3	1	1	-	Anderson					
25-35		12	10	-	1		1						
35-45		17	9	1	6	2							
45-55		17	3			4	1	Annualmen					
55-65		15	3	1	1	6	2	1					
65 and up	• •	9			1	5		*********	•				
Totals		89	56	5	11	18	4	1					

It will be noted from the above figures that the age incidence of new cases and deaths continues to shift to the later age groups. This tendency has become more and more apparent during the past decade and many of our new cases are found in older people as a result of reactivation and breakdown of apparently old healed disease acquired in earlier life. The cause of this reactivation is difficult to understand in most cases.

24 of the new cases added to the register were the result of inward transfers from other districts, 4 from the local registrar, 1 from the Registrar General and 1 a posthumous notification.

4. Domiciliary Visiting

The usual arrangements for home visits have obtained during the year. First visits to new cases are made by the chest clinic health visitor who completes the form relating to home conditions, number of family contacts etc. Subsequent visits are made by the local authority health visitor in whose district the patient resides. Her duty is to become familiar with the family and to see that the contacts are followed-up.

A total of 148 first visits and 1,394 revisits were made during the year. In addition Miss Wilson paid 370 special visits to the chronic cases.

The chest physicians made 128 domiciliary visits to patients too ill to attend the chest clinic.

From the housing reports of new cases the following facts were elicited:—

47 occupied a separate bedroom.

10 occupied a separate bed with others in the room.

82 occupied the same bed as other members of the family.

6 cases lived in 1 room.

22 cases lived in 2 rooms.

40 cases lived in 3 rooms.

50 cases lived in 4 rooms.

21 cases lived in over 4 rooms.

An improvement in the re-housing of tuberculous families was apparent during the year, as 39 families were provided with a council house as against only 14 in the previous year. There are still a large number of tuberculous families, however, who would benefit by better accommodation.

5. Treatment

Gateshead patients are normally treated in the first instance in the beds provided at Normans Riding Hospital, Winlaton, and in Ward 6, Sheriff Hill I.D. Hospital. Sanatorium beds elsewhere are readily available as required.

The number of Gateshead residents given institutional treatment during the year is shown in the following table:—

Table of Admissions, Discharges and Deaths

	In hospital on first day of year		A_{i}	Admissions Discharges										In hospital or last ay of year		
	\overline{M} .	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Holywood Hall																
Sanatorium	4	1	1	1	1		4		1				1	2		
Poole Sanatorium				1			1									
Seaham Hall																
Sanatorium	2				3		2	3								
Stannington Child-																
ren's Hospital			9			11			12						8	
Wooley Sanatoriun	n 5	1		42	24		46	24					1	1		
Sheriff Hill I.D.																
Hospital	13	7		51	47		41	47		9	1		14	6		
Normans Riding																
Hospital	15	5		147	66		152	64	and on the same	2			8	7		
4																
Totals	39	14	10	242	141	11	246	138	13	11	1		24	16	8	

6. After-Care and Rehabilitation

All cases following their period of hospital treatment are carefully followed-up at the chest clinic and continuation of drug treatment at home for many months is usual. This treatment is prescribed by the chest physicians who advise the patient's general practitioner accordingly.

As soon as a patient is considered fit for work he is referred to the Disablement Resettlement Officer if he cannot return to his old employment.

During the year 29 patients were so referred and he was able to place 19 in suitable jobs. A further 23 were admitted to Felling Rehabilitation Centre for a preliminary build-up and assessment before beginning full employment. In addition one man was sent to Finchale Abbey Training Centre and another to Shephard's Training Centre.

The After-Care Sub-Committee of the Gateshead Health Committee continues to provide assistance in many forms to those cases referred for help.

7. B.C.G. Vaccination

B.C.G. Vaccination is given to all tuberculin negative reactors among tuberculosis contacts, mostly children, who are willing to receive it. This vaccination is now readily accepted in nearly all cases.

During 1958 a total of 252 tuberculosis contacts were vaccinated and also 12 members of hospital staffs. There has been no untoward reactions noted in any of these cases.

8. The following table gives a general resume of the work of the Chest Clinic during 1958:—

	Respi	ratory		Non-re	spirato	ry	Totals			Guerr
	<i>M</i> .	F.	Ch.	M.	F.	Ch.	М.	F.	Ch.	Gra To
A. 1. Number of notified cases of T.B. on clinic register on 1st January 1958 2. Transfers from clinics un-	600	503	123	39	49	32	639	552	155	13
der H.M.C's. or B.G's. during the year	14	9		1		-	15	9		
adults during the year 4. Cases lost sight of which	3	5				-	3	5		
returned to clinic during the year	4	3		1			5	3		
B. Number of New cases diagnosed as Tuberculosis during the year: T.B. MINUS T.B. PLUS T.B. PLUS	29 38	23 18	10	3	7	1	32 38	30 18	11 3	14
Totals of A and B	688	561	136	44	56	33	732	617	169	1:1
C. Number of cases in A and B written off clinic register during the year: (1) Recovered	40	37	26	4	2	5	44	39	31	1
(2) Died (all causes)(3) Removed to other H.M.C.	20	3	7		7	1	20	3	0	1
or B.G. clinics (4) Children transferred to	38	41	7	6	7	1	44	48	8)
adults during the year (5) Other reasons Total of C	1 99	1 82	$\frac{8}{41}$	10	9	<u></u>	1 109	1 91	$\frac{8}{47}$	2
D. (1) Number of notified cases of T.B. on clinic register on 31st December 1958 (2) Number of above known to have had a positive	589	479	95	34	47	27	623	526	122	12
sputum within preceding twelve months	50	27	2				50	27	2	
E. (a) Number of persons (excluding transfers) first examined during the year		-		_	_		1808	2363	894	50
who attended as contacts who were: (1) Diagnosed as tuber- culous	4	4	5	_			4	4	5	
(2) Not tuberculous (3) Not determined (as at	98	146	380	direction in the second			98	146	380	(
31st December 1958)	5	5	18				5	5	18	
F. Number of patients on clinic register awaiting admission to T.B. institution	_		_		_	_				
1. Number of attendances at the including contacts	e Clini 1147			No. of : Specime		putum	examir	ned .	. 29	95

S. D. ROWLANDS, Consultant Chest Physician

VENEREAL DISEASES.

Return relating to Gateshead Cases treated at Ward 34, Newcastle General Hospital, 1958.

			Press	,								
	Syphi	ilis	Gonori	·hoea	Condi other Ven			Totals	1958	1957	19 5 6	1955
	M.	F.	<i>M</i> .	F.	M.	F.	M.	F	. Total	l		
sons under treatment or obvation on January 1st	75	114	6		10	3	91	117	208	3 225	224	234
cases returned	3	1			1		4	1	5	9		24
ses transferred from other as										1	2	2
bhilis rimary catent, 1st year of infection Cardio-vascular other late or latent stages yphilis chilis: congenital norrhoea ner conditions: Chancroid Lymphogranuloma Venereum Granuloma inguinale Non-gonococcal urethritis yaws y other conditions requiring reatment inditions not requiring treatment diagnosed conditions		7		5			1 1 1 16 	7 	21 ————————————————————————————————————	17 ————————————————————————————————————	1 4 2 18 —	4
tals	81	123	22	5	103	18	206	146	352	376	388	449
tients completing treatment donor observation	2	10	9	4	89	17	100	31	131	147	156	211
tients transferred elsewhere	4	7	5		7		16	7	23	11	3	10
tients not completing treat- nt and/or observation	9	10	2				11	10	21	10	8	1
tients under treatment on cember 31st	66	96	6	1	7	1	79	98	177	208	221	227
tals	81	123	22	5	103	18	206	146	352	376	388	449
of attendances for medical atment							1181	853	2034	2564	2799	2779
of attendances for interdiate treatment							148	47	195	188	70	41

W. V. MACFARLANE, M.D., D.P.H.

Physician in Charge

PART IV

MISCELLANEOUS

A. National Assistance Act, 1948 (Section 47)

Seven cases (as against 5 in 1957), were referred to the Medical Officer of Health for possible action under the above Act.

Information as to the cases was received from the family practitioners, the Welfare Services Department, a health visitor, a relative and a neighbour. In three cases the necessary certificate was issued together with the urgency certificate under the Amendment Act. As a result, one case was removed to Bensham General Hospital, and afterwards to a private nursing home, and the other two cases were removed to Fountain View Welfare Hostel.

The remaining four cases were kept under supervision by the Welfare Services Department and the Home Help Service.

Of the cases removed to Fountain View, 1 died and the other, after a period of three weeks, was allowed to return home where she has been kept under observation.

B. Welfare of the Blind

Through the courtesy of Mr. R. A. Haysom, Director of Welfare Services, I am able to reproduce the following tables relative to the status of the blind at the end of the year:—

				Males	Famales	Total
Registered Blind Person	ons			105	140	245
Persons in Residential	Accom	ımoda	tion			
Fountain View				10	8	18
Beacon View Bensham General Hos	 spital			1		1
Children aged under 16	5 years	7:				
Educable Uneducable	• •			4	3	7
Occupation of Employe	ed Pers	sons:				
Workshops for the Blin	ıd:					
Basket workers				4		4
Mattress Makers Brush makers		• •		2 5	_	2 5
Sewing machinists						<i></i>
Mat makers				9		9
Ships Fender Makers						_
Machine Knitter		• •	٠.		1	1
Otherwise employed:						
Piano tuners				1		1
Telephone operators	• •	• •		1	1	1
Open employment Shopkeepers		• •	• •	3	1	4
Snopkeepers	• •	• •	* *	1		Α.

Physically and Mentally Defective and Disordered:

				Males	Females	Total
(a)	Mentally disordered					
(b)	Mentally defective			2	1	3
(c)	Physically defective			10	22	32
	Deaf without speech			2	1	3
(e)	Deaf with speech			3	5	8
(f)	Hard of hearing			3	10	13
(g)	Mentally defective and	deaf w	ith			
,,	speech				1	1
(h)	Physically defective and	d deaf	with			
	speech			1		1
(i)	Physically defective and	l hard	of			
	hearing		0 0	1	2	3

So far as school children are concerned, 4 males and 3 females have been ascertained to be blind within the meaning of the Act. These are having special education in schools for the Blind, with the exception of 1 female under school age, and 1 male who is receiving home tuition, aged 11 years.

The additional information required by the Minister of Health in his circular dealing with the annual report for 1953 is given in the following tables :--

	Follow-up of F	Registered	Blind Perso	ns		
		Cause of Disability				
		Cataract	Glavcoma	Retrolental fibroplasia	Others	
(1)	Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8. recommends:—					
	(a) no treatment	3			9	
	(b) treatment (medical, surgical or optical)	12		girlinalistina	1	
		15	Pagestarra		10	
(2)	Number of cases at (1)(b) above which on follow-up action received treatment	3			1	
	Follow-up of Registe	stered Partially Sighted Persons Cause of Disability				
		cataract	Glaucoma	Retrolental fibroplasia	Others	
(1)	Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8. recommends:—					
	(a) No treatment	1	1	(Names and	3	
	(b) Treatment (medical, surgical or optical)	4	1		3	
		5	2		6	
(2)	Number of cases at (1)(b) above which on follow-up action have received treatment	1	1		2	

Epileptics and Spastics

The following is the known position so far as epileptics are concerned in Gateshead.

There are 6 known epileptics among the pre-school children.

Among school children there are 2 epileptics having special education in a residential school and 8 who are attending ordinary school. One epileptic is not attending any school, and another is attending a special class for educationally subnormal children while awaiting admission to a residential school. There are 3 epileptic mentally defective children, all ineducable, who are not at school at all.

So far as adolescents and adults are concerned, it appears that 35 males and 14 females are registered as epileptic persons, a total of 49. Of this total 10 men and 3 women are unemployed, 4 are employed at the Remploy Factory and the remainder are employed at ordinary occupations.

The position in regard to "spastic" persons is that in the pre-school population, there are 6 known cases.

Among the school population, 22 are known and 11 are having education in the "Cedars" Special School, 3 are having education in the Percy Hedley School and 5 attend ordinary school. 3 children of school age are notified as being ineducable due to mental defectiveness.

"Spastics" in the adult population are apparently not catered for. There are four such persons known to the Ministry of Labour Resettlement Officer. Two of these are working one of them actually doing delivery duties on a bicycle. The remaining two are registered as disabled and unemployed.

C. Pharmacy and Poisons Act, 1933

24 persons were registered for the sale of poisons listed in Part II of the Poisons List, and these were supervised on behalf of the Council by the Pharmaceutical Society's Inspector, who has reported that the provisions of the Act were adhered to in all cases.

D. Superannuation Acts

44 persons (23 males and 21 females), were examined for new appointments with the Gateshead Local Authority. 3 males and 1 female were examined by their own authorities in connection with their appointments to posts with Gateshead Corporation. 1 male was examined on behalf of another authority.

Under the modified scheme for manual workers employed by the Local Authority, 216 persons were examined (158 males and 58 females).

Two people were examined after application by them to be retired on the grounds of ill-health and 7 were examined after various periods of sickness, to ascertain their fitness to continue at work.

PART V

SANITARY CIRCUMSTANCES OF THE AREA Report of the Chief Public Health Inspector John P. Lavender

In the absence of any major event, due either to accident unforseen or to design with intention premeditated, there is but little change to report from year to year respecting the sanitary circumstances of the area. Such has been the case during this year of 1958, a year of routine work but one in which progress was made in at least one respect, the clearance of some unfit housing and the consequences thereof.

To the benefit of the inhabitants an adequate supply of water of a satisfactory standard of purity has been at all times available and an efficient system of sewerage for the removal of liquid waste has been maintained also an organisation for the removal of and disposal of solid refuse has operated with such regularity and smoothness as to be hardly noticeable.

The continued disposal of the untreated sewage of the town into the river Tyne cannot be accepted, however, with the same degree of satisfaction if only by reason of aesthetic objections though there may be grounds for hopefulness in the fact that the long standing problem of reducing the pollution of the river has again been revived and has reached the talking stage.

Much less beneficial to the inhabitants of the town is the pollution of the atmosphere which shows but little improvement. Whilst one need not immerse oneself in or imbibe the waters of the river, one cannot escape the effects of living in and breathing the air with its harmful impurities.

The picture becomes brighter, however, when looking at that part of the following report relating to Housing where progress can be seen in the elimination of some unfit housing, the removal of some families to more healthy environment on the outskirts of the town and, not least important, the provision of new housing accommodation in the cleared areas so equipped as to eliminate the possibility of making any further contribution to atmospheric pollution. It augurs well for the future that there are prospects of this desirable procedure continuing.

It is still a matter for great concern that those parts of this report relating to the Sanitary Inspection of the Area and the Inspection and Supervision of Food give even less reason for satisfaction owing to further depletion of the staff of the Public Health Inspectors department since the report of 1957. But for the loyalty of the staff of inspectors, consisting of the Deputy Chief Inspector, Mr. G. Charlton, three Senior Inspectors and one newly qualified inspector, not even the essential obligations of the department could have been met. That this difficult circumstance was fully realised and treated with tolerance by the Medical Officer of Health, Dr. Grant, and the Chairman and Members of the Health Committee was an encouragement in our endeavours to uphold the prestige and tradition of the department.

A. WATER SUPPLY

Water is supplied to the town by the Newcastle and Gateshead Water Company, as the statutory undertakers, from supplies mainly collected from upland sources in the north-western areas of Northumberland and after treatment by filtration and chlorination is distributed within the town partly through mains directly serving the lower areas and partly through two service reservoirs, maintained by a pumping station, one at Beacon Lough and one at Carr Hill, situated at 520 feet and 450 feet respectively above sea level, serving the higher areas.

The Water Company's statements as to the quantity of water in store made at monthly intervals throughout the year show:—

Maximum of 5,223 million gallons, equal to 186 days supply, in March Minimum of 3,836 million gallons, equal to 136 days supply, in November Average of 4,635 million gallons, equal to 165 days supply, for the year.

This represents a general increase in the region of 20 per cent. upon the reserves recorded for the previous year.

Monthly examinations of the water by means of 10 samples submitted for chemical analysis and 10 for bacteriological tests were made with satisfactory results as shown by the following reports:—

The reports of the bacteriologist show that in each of the 10 samples "the probable number of coliform bacilli, MacConkey 2 days at 37°C. per 100 ml.—Nil."

The following is the report upon the sample taken during the month of October when the reserves were approaching the lowest level of the year.

REPORT OF THE PUBLIC ANALY		Pc	arts per		
Chemical Results					Million
Total Solids dried at 180	°C.				180
Chlorine as chlorides					12
Free Ammonia	• •				Trace
Albuminoids ammonia					0.01
Nitrogen as Nitrates					0.50
Oxygen absorbed (4 hour	rs at 80	°F.)			4.00
Total Hardness					137.
Permanent Hardness					37
Temporary Hardness		• •			100
Lead and Copper					None
Iron					Trace
Appearance and colour (degrees		. Pale	yellow and clear.
Smell and Taste		_			sfactory
Microscopical examinati					sfactory
pH value	OII OI G	- POSIC	•		7.2
par mine	• •	• •	• •	• •	, . ~

REPORT

This sample of water contains slightly less total solids and hardness than that examined in September.

It is of satisfactory organic purity, it is also of good colour and it is free from taste or odour.

I am of the opinion that the water is suitable for a Public supply.

(Signed) W. GORDON CAREY.

The water is not liable to plumbo-solvent action.

All premises, including 34,282 houses, within the Borough, of which the population is approximately 110,000, are supplied with water from the Water Company's distribution mains and there is now only some 4 per cent. where the draw off taps, though within the premises, are not actually inside the dwellings. These are being reduced in number annually as a direct result of the clearance of areas of unfit housing.

It can be stated with confidence that the supply of water to the town is satisfactory in all respects.

B. SEWERAGE AND SEWAGE DISPOSAL

The sewerage systems of the town continue to function without serious inconvenience.

No major sewerage works have been carried out during the year.

It has, however, been found necessary to take into consideration flooding which had occurred from time to time in the Brighton Road area with the result that works have been authorised for the installation of the Hilda Street relief sewer from Brighton Road to the Western Outfall at Victoria Road. These works, at an estimated cost of £19,000, are scheduled for commencement in January, 1959.

The whole of the sewage from the houses and other buildings in the town, with the exception of those in part of the housing estates at Wrekenton, is discharged without prior treatment direct into the river Tyne which is tidal up to and beyond the Borough Boundaries. This constitutes a considerable contribution to the heavy pollution of the river especially as the whole of the sanitary conveniences installed in the premises consist of water closets connected to the sewers.

In the case of the exception referred to at Wrekenton, the sewage is conveyed to sewage purification plant in the area of the Felling Urban District Council adjoining the eastern boundary before being discharged to the river.

C. PUBLIC CLEANSING

The following report upon the work of the Cleansing Department for the year is kindly supplied by Mr. W. C. S. Culley, M.Inst.P.C., Cleansing Superintendent.

Report of Transport and Cleansing Department for 1958

Refuse Collection and Disposal

Number of Dustbins and Dry Boxes in the Borough—37,900.

A regular weekly collection of House and Trade Refuse was maintained during the year and approximately 2,000,000 calls were made to all classes of premises.

Regular collections were also made from the multi-storey flats at Barns Close, Priory Court and Regent Court where the latest types of refuse chutes and containers are installed.

The refuse collected was disposed of by controlled tipping on the following tips; the latter being reclaimed for use as a recreation ground.

Farnacres Tip . . 18,526
Pyburn Lane Tip 21,797
Total . . 40,323

Dust Bins

1,014 defective bins were replaced by British Standard 2½ cu. ft. galvanised bins from the stocks of this Department during the year, by sales to local property owners and Corporation Departments.

Street Cleansing

There are approximately 150 miles of roads and streets (plus back lanes) within the Borough. These are regularly cleansed, and the quantity of street sweepings collected amounted to 6,944 tons, which was disposed of as follows:—

Farnacres Tip . . 6,063
Pyburn Lane Tip 881
Total . . 6,944

An average of 35 sweepers with 8 Electric Trucks, together with 2 modern mechanical road Sweeper collectors were daily engaged on this work.

Street Gullies

Approximately 8,000 gullies were emptied, cleansed and resealed at monthly intervals or less by two vehicle mounted Gully Emptiers. These machines can also be utilised for Street Watering, Pressure Washing, Sewer Flushing and Cesspool emptying when necessary.

Salvage

During the year 179 tons of re-usable waste, valued at £1,561 was salvaged and returned to industry as raw materials. The demand for waste paper and scrap metal however eased considerably during the past twelve months.

D. PUBLIC BATHS

The following report with respect to the facilities available as public swimming baths and warm baths is kindly provided by Mr. I. D. Wright, Baths Superintendent.

"The Gateshead Baths Department is comprised of two establishments, Mulgrave Terrace Baths opened in 1890 and Shipcote Baths opened in 1942. Each of these has a swimming pool of the following dimensions and capacity:—

	Size	Depth	Area	Capacity
Mulgrave Terrace	81 ′0″ x 30 ′0″	3 '3" to 5 '6"	270 sq. yds.	60,000 Gls.
Shipcote	100 ′0″ x 40 ′0″	3 '6" to 8 '6"	440 sq. yds.	140,000 Gals.

In addition, at Mulgrave Terrace there is a suite of 25 warm baths which are very popular and well used as may be perceived from the figures below.

Purification of the water in the swimming pool is achieved by recirculation of the water through vertical pressure filters containing sand/gravel filter media. Filtration efficiency is increased by the introduction of Aluminium Sulphate to the water which, by chemical reaction, produces an Aluminium Hydroxide gel on the filter bed. The Break Point Chlorination process is employed to sterilise the swimming pool water. The turn over rate is every four hours.

Both swimming pools are heated by steam fed calorifiers and pool temperatures are maintained at 78°F and 75°F in winter and summer respectively.

Admission to these establishments are as follows:—

	Year ending 31st March, 1959		Year ending 31st March, 1958		
	Swimming bath	Warm Baths	Swimming Bath	Warm Baths	
Shipcote Mulgrave Terrace	94.376 49.453	Nil 30.486	88.869 37.707	NIL 31.153	
Total	143.829	30.486	126.576	31.153	

Showing a slight decrease in the use of the warm baths and in increase of approximately 14 per cent. on the previous year in the use of the swimming pools.

In addition to the admissions of the public as shown above, both swimming pools are used by the Education Department for Physical Education of school children numbering approximately 70,000 per annum and are also used by members of the swimming clubs numbering approximately 12,600 at Shipcote and 3,600 at Mulgrave Terrace making a grand total of 230,000.

Signed I. D. WRIGHT,

Baths Superintendent.

Each of the samples from the Shipcote Baths and the Mulgrave Terrace Baths, taken and submitted for bacteriological examination were reported as being free from coliform bacilli. The efficiency of the system of filtration and chlorination is therefore satisfactory particularly as the bulk of the water was used continuously without being changed during the year except that 1,000 gallons of fresh water from the mains supply is added daily during the process of chlorination.

E. HOUSING

Housing Accommodation provided by Local Authority

The following table shows the progress of rehousing of families from overcrowded and unfit houses in the Borough.

1.	Houses provided by the Local Authority prior		
	to 1945		2,648
2.	Houses provided 1945 to 1957 inclusive:		
	(a) Built in Gateshead by Local Authority	3,854	
	(b) Built outside Gateshead by Local Authority (c) Provided by Felling U.D.C	350 716	
			4,920
3.	Houses provided during 1958:		
	(a) Built in Gateshead by Local Authority	369	
	(b) Built outside Gateshead by Local Authority	33	
	(c) Provided by Felling U.D.C	160	5.00
			562
	Total number of houses provided		8,130

Summarising the figures shown above, of the 5,482 houses provided since the war for rehousing purposes, 4,223 were built within the Borough and 1,259 were built outside of the Borough.

Overcrowding

Some degree of overcrowding still exists in houses in the town but it is apparent that this is being reduced year by year by the rehousing activities of the local authority. 4,263 families having been rehoused during the post war period, including 256 this year, exclusive of rehousing from unfit properties, many of which being overcrowded must also have contributed to the alleviation of overcrowding to a considerable degree.

Unfit Housing

(a) Clearance Areas

Progress in the rehousing of families from the houses in confirmed clearance areas including the Chandless Area and the Melbourne Street No. 1 Clearance Area, is shown as follows:—

Houses originally in confirmed clearance areas Houses demolished in 1956 and 1957 Houses demolished in 1958	• •	161 367	821
Troubes demonstred in 1900	• •		528
Houses remaining to be demolished	• •		293
Families originally in confirmed clearance areas Families rehouses during 1956 and 1957		544 226	973
Tammes remoused during 1936	• •		770
Families awaiting rehousing in clearance areas			203

Of the 1,411 houses included in the areas surveyed in 1950 for inclusion in the first five year clearance programme there remained in 1956 at the commencement of the five year programme 1,183 houses to be dealt with and of these at the end of 1958 there remained 254 houses. The houses dealt with are accounted for as follows:—

Houses in the original 5 year programme		1,411
Houses dealt with by Closing and Demolition Orders before commencement of Clearance Areas	228 794 135	1,157
Houses remaining of original 5 year programme to be dealt with at the end of 1958		254
		1,411

Of the families occupying the original 1,411 houses there remained at the end of the year 444 to be rehoused. It is still anticipated that this rehousing will be completed during 1959 and that a commencement will have been made with the next 2,800 houses scheduled originally to be dealt with within 15 years but this period could possibly be reduced to 10 years if the building programme can be accelerated.

Satisfactory progress having been made during 1957 with the large commitments remaining from 1956, it was found possible to proceed further towards the completion of the 5 year programme by the creation of clearance areas to include almost the whole of the remainder of that programme. To this end a further 12 areas were represented to which it was found necessary to add 4 other small areas to enable satisfactory redevelopment.

Areas represented as Clearance Areas during 1958

Location		No. of Areas	No. of houses	No. of families	No. of persons
Ellison Street and Easton Court		4	33	40	120
Melbourne Street (No. 2)		1	15	30	88
Saltmeadows		1	41	28	93
Hawks Cottages		1	21	20	63
Backfield Street		1	18	18	61
St. James Road and Railway Terrace		1	43	39	112
Chow Dene		2	21	21	46
Belle Vue and Cross Keys Lane		3	25	24	54
Lowery's Lane and Weathercock Lane	• •	2	15	18	42
Totals		16	232	238	679

No orders in respect of Clearance Areas were confirmed but a public enquiry in respect of the four areas in Ellison Street and Easton Court was held by the Minister on the 30th September and the result thereof is awaited. The remaining areas were all in the various stages of the necessary proceedings.

With respect to the remainder of the 5 year programme, consisting of approximately 70 houses to be included in 4 clearance areas, one of which was extended to include 140 properties originally scheduled in the 10 to 15 year programme, inspections had been made or were in progress together with preparations for their representation early in 1959, thus concluding the 5 year programme and merging into the next phase of the clearance of areas of unfit housing. These areas are located at Sheriff Hill and in the Low Team Districts.

(b) Individual Unfit Houses

45 houses occupied by 37 families were dealt with, being houses unfit for human habitation and incapable of being rendered fit at reasonable expense, by means of individual demolition orders or closing orders during this year, details of which are shown below.

Closing and Demolition C	Orders			No. of houses	No. of Families		No. of families remaining end of 1958
Outstanding from 1957 Made during 1958		• •	• •	114 45	136 37	88 18	48 19
				159	173	106	67

It may be noted that since 1945 the number of houses dealt with by individual Closing and Demolition Orders is 715 occupied by 795 families of which 728 have been rehoused. This constitutes a substantial contribution to the clearance of unfit houses at an average of 56 per annum.

The following table gives an account of the houses demolished and dwellings closed during the year and of the persons displaced therefrom as reported quarterly to the Ministry of Housing and Local Government.

				Dwelling houses Demolished	No. of Persons Displaced
Houses	s Included in Clearance Areas	• •	• •	367	721
Houses 1. Hou	s Not Included in Clearance Areas s demolished or closed using Act, 1957 Houses demolished as a result of formal	or info	ormal		201
(b)	procedure under Section 17 Parts of buildings closed (Section 18)		• •	63 37	204 124
(c)	Unfit houses closed (Section 16 and 17)	• •		7	24
				107	352
			-		

This year may be regarded as effective so far as housing is concerned and the work in hand at the close of the year promises a further year in 1959 of similar activity provided that adequate staff is available.

Housing Repairs

Houses made fit by informal action and by the use of statutory powers during the year as reported quarterly to the Ministry of Housing and Local Government.

Informal Action Number of unfit houses rendered fit and houses in which defects were remedied during the year as a result of informal action under the Housing or Public Health Acts	No. of houses
Action under Statutory Powers Public Health Act Number of houses in which defects were remedied after service of formal notice:— (a) by owners	13 Nil
Housing Act, 1957 Number of houses made fit after service of formal notice under Sections 9, 16, 17, 18 and 24:— (a) by owners	15 4

Rent Act, 1957

Initial difficulties having been overcome during the period in the latter half of 1957 in which this Act was in operation, work relating to Certificates of Disrepair was carried out smoothly and with good effect. One result which is noticeable is a reduction in the number of notices served under the Housing Act, 1957 which, however, may be described as merely a change of procedure.

The table below shows the number of applications received for Certificates of Disrepair, certificates issued etc. but it should be borne in mind that this must represent but a fraction of the number of cases in which landlords have responded to tenants' "Notices of defects of repair" (Form G) without the knowledge of this department. Whether

this is beneficial is a matter for speculation owing to the limitations as to the use which may be made of Form G. procedure and the lack of tenants' technical knowledge as compared with the more thorough procedure by experienced inspectors under the Housing Act. It may be reasonable to assume that in a greater number of houses there is a standard of maintenance which satisfies the tenants but that fewer houses are brought up to that standard which could be obtained by means of the Housing Act. There have been, however, cases in which procedure under both Acts has been necessary and effective.

Certificates of Disrepair		1957 (six m	onths)	1958	3
Applications received Applications outstanding from previous year		Nil	141	170 27	197
Undertakings from landlords (Form K) Work completed before expiry of notice of inte	 en-	92		133	
tion to issue Certificate		4 18		11 33	
Applications received and action pending		27	141	20	197
Applications for Cancellation of Certificates Certificates Cancelled		1		9	

F. SANITARY INSPECTION OF THE AREA

1. Staff

The year commenced with a seriously depleted staff such as has never been experienced in the history of the department except during the war periods. Of the twelve established posts for qualified inspectors there were six unfilled, the remaining six comprising the Chief Inspector, The Deputy Chief Inspector and four other qualified inspectors. One of the latter resigned and was replaced by another newly qualified inspector who had been trained in the department.

To add further to the difficulties of the department there came early in the year a loss on the clerical staff by the untimely death of Mr. Harold Gibson, an intelligent and capable clerk, who, during his 22 years service, had acquired a knowledge and experience of the work of no mean value to the department; a loss not easily repaired.

Such was the state of affairs throughout the year which, in this respect, ended no better than it began as all efforts to find a remedy were futile. In such circumstances proper organisation of the work to meet fully the obligations of the department was impossible and there existed a constant fear of being overwhelmed had any major emergency arisen, the consequences of which might have been serious.

Inevitably throughout the year it has necessarily been a case of first things first and matters of urgency and greater consequence left little time for any others. Atmospheric pollution, food hygiene, offensive trades routine inspections generally received but scant attention. To add to the pressure a new slaughterhouse came into operation during the latter half of the year taking up the attention of at least one inspector 3 or 4 days each week. Housing inspection and all the work incidental to the preparations for the making of clearance areas slowed down and

began to fall behind the schedule of the phased programme. However, it is probable that this decline may be arrested as the services of an experienced inspector have been secured, on a temporary part-time basis, for this work commencing in January of 1959.

Credit for the maintenance of the essential services of the department under such handicaps must be accorded ungrudgingly to a loyal and efficient staff who met and coped with the situation magnificently. It must also be recorded that, by giving such assistance as came within their capacity, the three student inspectors, Messrs. Best, Hill and Martin made a contribution to the work which cannot be allowed to pass without recognition or appreciation.

2. Complaints received and dealt with during the year

Of the complaints received

1,273 related to general matters.

1,944 related to absence of water supply to houses.

377 related to infestations by rodents.

39 related to defective or absence of dust bins.

The total of 3,633 complaints were dealt with appropriately.

The more severe weather conditions during the winter periods of the year account for an increase of 1,582 cases of absence of water supply to houses.

3. Notices issued

Notices were served upon the owners, agents and tenants requiring the abatement of nuisances and repairs to dwellings, drains, sanitary conveniences and the provision of dust bins as follows:—

INFORMAL NOTICES Public Health Act, Housing Act and Gateshead Corporation Act.	Total to 31.12.57			r end 2.58	Total to 31.12.58
No. of notices served	21,605	18,924 2,000 489 192	678 192	22,283 502 7 18 343	19,426 2,007 507 343
	21,605	21,605	870	870 22,283	22,283
STATUTORY NOTICES Housing Act, 1957, Section 9	Total 1 31.12.5			r end 12.58	Total to 31.12.58
No. of notices served No of notices served outstanding from previous year	1,969		3 43	1,972	,
No. of notices complied with or carried out in default		1,919 7 43		$\frac{14}{32}$	1,933 7 32
No. of notices outstanding	1,969	1,969	46	46 1,972	
	-				

No. of notices passed to Borough Surveyor under Section 10		1,049		11		1,060
Public Health Act, 1936 A. Sections 39, 45, 83, 89 and 93	Total to 31.12.57	Whiters - Profess de Plantes	<i>Year</i> 31.1			Total to 31.12.58
No. of notices served	215	177 21 17	9	13 4 9	224	190 25 9
1	215	215	26	26	224	224
B. Section 75—Dustbins	Tot 31.12.:	al to 57	<i>Year</i> 31.1			Total to 31.12.58
No. of notices served	1,453		21		1,474	
year No. of notices complied with by owner Statutory action taken in default by		921	6	18		939
Corporation No. of notices outstanding		526 6		6		532
	1,453	1,453	27	27	1,474	1,474
	1,	1,.00				-, . ,

4. Summary of Inspectors' visits and inspections

Public Health Act				
Infectious Diseases			257	
Nuisances			204	
Water Supplies			206	
Drainage			544	
Stables and Piggeries			14	
Offensive Trades			42	
Tents, Vans and Sheds				
Refuse Disposal			218	
Atmospheric Pollution			130	
Infested Premises			130	
Public Conveniences			3	
Schools			13	
Places of Entertainment			8	
Public Houses (Section 89))		5	
Miscellaneous			172	
				1,955
				- ,
Housing Acts				
Closing and Demolition O	rders		321	
Slum Clearance			1,170	
Overcrowding			31	
Repairs and Rents Act			669	
Defects and Repairs			3,539	
Houses let in Lodgings			6	
***************************************		-		5,736
				7

Food and Drugs Act					
Meat Inspection				108	
Food Inspection				60	
Shops				175	
Stalls and Vehicles				7	
Restaurants				15	
Fish Fryers				2	
Dairies and Milk Sh	ions			406	
Ice Cream Shops an	.1	tories		67	
Food Factories		001100	• •	24	
Public Houses	• •	• •	• •		
Knackers Yard	• •	• •	• •	8	
Food Sampling	• •	• •	• •	220	
Food Poisoning	• •	• •	* *	72	
Slaughterhouses	• •	, .	5 #	51	
Staughterhouses	• •	n •		<i>J</i> 1	1 215
					1,215
Factories Act					
				100	
Factories	• •	• •	• •	197	
Outworkers			• •	29	006
					226
N. 1 1 N. N. 1	A 4				
Merchandise Marks			• •	4	
Fertilisers and Feed			• •	1	
Rag Flock etc. Act				2	
				11	
Shops Act					
Diseases of Animals				138	
Prevention of Dama	ige by	Pests A	ct	305	
					457
				_	
		Tota	ıl Insp	ections	9,589
		T	1 17: 4	_	0.066
		Tota	l Visi	TS.	8,966
				-	

The number of visits and inspections at 50 per cent. less than the numbers for the year 1955, the last year in which the department was fully staffed, reflects the effect of the depletion in the number of inspectors.

5. Notifiable infectious diseases

Visits were made on 257 occasions to houses for the purpose of investigating cases of infectious disease notified to the Medical Officer of Health and reports as to the conditions found were made thereon.

6. Offensive Trades and Knackers Yard

Offensive trades conducted on seven premises duly authorised for such purposes are comprised as follows:—

- 1 Fat Melter.
- 1 Tallow Melter and Blood Drier.
- 1 Tripe Preparer.
- 1 Hide and Skin Sorting.
- 3 Marine Store Dealers.

Complaints received with respect to one of these premises during the year, the Tallow Melter and Blood Drier, were dealt with and some improvement effected. This matter is still being pursued. Routine inspections were made in the course of 42 visits and reports showed that the premises were, with the above mentioned exception, maintained in satisfactory condition generally.

The licensed knackers yard at Blackwall, South Shore Road, occupied by the Exors of Michael Dobson (deceased) has been kept under regular supervision and found to be conducted and maintained satisfactorily without offence or complaint arising. An occasion arose in January, due to the finding of an anthrax infected carcase, when the premises were closed for a short period which permitted a thorough cleansing and disinfection.

The number of animals and carcases disposed of at the premises during the year was 1,047 comprising:—

213 horses and ponies.

468 cows including 2 under the Tuberculosis Order.

363 other bovine animals.

1 sheep 2 pigs.

7. Factories Act, 1937 and 1948.

The Register of Factories required to be kept by the District Council in accordance with Section 8(3) of the Act of 1937 has been revised after comparison with the lists of factories kept by H.M. Inspector of Factories and shows a total of 440 factories in the Borough at the end of the year of which 401 are factories in which mechanical power is used and 21 are factories in which mechanical power is not used. There are also 18 other premises used as warehouses etc. in which Section 7 is enforced by the Local Authority.

Defects and contraventions found during the course of inspections were readily remedied by the factory occupiers upon their attention being drawn to such and in 27 cases written notices were sent to occupiers.

Notices received from H.M. Inspector of Factories in respect of 9 factories in the Borough relating to matters requiring the attention of the District Council under the provisions of Part I of the Act of 1937 received attention with satisfactory results.

The particulars required by Section 128 (3) of the Act of 1937 to be reported with respect to matters under Part I and Part VIII of the Act which are administered by the District Council and prescribed by Form 572 of the Ministry of Labour and National Service are shown in the table below.

(1) Inspections

(1) mspections	A.T	Number of		
Premises	Number on Register	Inspections	Written Notices	
(i) Factories in which Section 1, 2, 3, 4 and 6 are				
to be enforced by Local Authorities (ii) Factories not included in (i) in which Section 7	21	10	2	
is enforced by the Local Authority (iii) Other premises in which Section 7 is enforced	401	173	23	
by the Local Authority	18	14	2	
	440	197	27	

(2) Cases in which defects were found

No. of cases in which detects were found

	William William Committee		Referred		
Particulars	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness	3	4			
Overcrowding					
Unreasonable temperatures					
Inadequate ventilation	1	1			
Ineffective drainage of floors Sanitary Conveniences:—					
(a) Insufficient	1	1		1	
(b) Unsuitable or defective	38	32		8	
(c) Not separate for sexes Other offences against the Act (not					
including offences relating to outwork)					
	43	38		9	

There were no cases in which prosecutions were instituted.

Outworkers—Part VIII of the Act, Section 110 and 111.

One (1) outworker was notified as being employed by the occupier of a factory within the Borough.

The names and places of employment of 20 outworkers within this district, employed by the occupiers of five factories outside the Borough, were notified by the Councils of two other districts.

There were 14 outworkers on the register for the earlier part of the year and 21 for the later part of the year.

The places of employment of all outworkers, which were in all cases their homes, were visited and no contraventions of this part of the Act were found.

No cases of default in sending in lists of outworkers to the Council were found and no occasion arose for the service of notices or for prosecutions under this part of the Act.

8. Shops Act, 1950, Section 38.

In the course of 175 visits to shops for various purposes matters arising under this Act, including ventilation, temperature, sanitary accommodation, water supply and washing facilities, drainage, cleansing and disinfestation and general repairs, were dealt with informally with satisfactory results.

9. Places of Public Entertainment

In accordance with the Ministry of Health Circular dated 25th August, 1920 all places of public entertainment in the Borough, comprising two theatres, eleven cinemas, three billiard halls and thirty-three premises licensed for music, dancing and singing have been inspected.

For the purpose of the authorities responsible for the licensing of the premises certificates as to the sanitary conditions were issued and reports were made to the appropriate authorities. Certificates of satisfactory conditions were issued in respect of the two theatres, ten of the cinemas, three billiard halls and the thirty-three other premises. In respect of the remaining one cinema, a certificate was issued conditional upon the execution of certain works required for the maintenance of proper sanitary conditions.

The general standard of maintenance of premises used for public entertainment is satisfactory, general repairs and cleansing and decoration being carried out by the licencees readily upon request.

10. Disinfestation of verminous premises

Details of the types of premises where disinfestation work has been carried out for various kinds of infestations are shown below.

Premises treated for Cock	roach	es			
Council houses				18	
Private houses				5	
Hospitals				15	
Other premises				8	
					46
Premises treated for Bugs	and c	ther Ve	rmin		
Council houses				20	
Private houses				23	
Other premises				15	
-					58
Furniture disinfested on re-	emova	al to Co	uncil		
houses				121	
					121
					225
					225

11. Prevention of Damage by Pests Act, 1949

Operations under this Act were continued throughout the year for the destruction of rodents in sewers and buildings also in areas of open land where infestations were found as a result of inspections.

Sewer Treatments

Two complete treatments of the whole of the sewerage systems of the town were carried out with two intermediate treatments and one special treatment as an experiment upon flushing shafts. The first intermediate treatment consisted of re-baiting, after a suitable interval, points indicated by the first completed treatment as having been infested and this indicated the degree of effectiveness of the previous treatment as being satisfactory. The second intermediate treatment consisted of treating the largest possible number of sewer manholes by direct poisoning without recording takes, but as a safeguard pending the lapse of a suitable interval before commencing the second complete treatment.

The experimental treatment using flushing shafts for baiting was undertaken due to a suitable method of baiting having been found, the technique consisting of suspending bait enclosed in stockinette which proved quite successful. This method will in future be incorporated in the normal sewer treatments in addition to the sewer manholes.

Tr	reatment			Bait used	Manholes baited	Poison takes recorded
A	ll sewers January to April			Warfarin	700	81
1s	t. Intermadiate		• •	Warfarin	110	13
2 2r	nd. Intermediate June — July			Zinc Phosphide	1,085	not recorded
1	lushing Shafts July — August	• •		Warfarin	374	47
A	ll Sewers September — November	• •	• •	Warfarin	639	87

Owing to changes of methods and procedure also the use of different poisons comparisons with the results obtained in previous years cannot be made precisely. The general indications are, however, that the rat population in the sewers continues to decline. Further reduction or even maintenance of the present level will require regular continuation of treatments by the existing methods or any improved methods which may become available.

Rodent Control in Surface Premises

The number of complaints received, infestations found and treatments carried out for dwelling houses and other premises shown in the table below indicates a slight reduction compared with last year. As anti-coagulents are used the number of rodents destroyed cannot be estimated although it can be stated that the methods employed are successful in clearing premises of infestation.

Type of Premises	Local Authority Premises	Dwelling Houses	Business and Other Premises	Totals
Properties in Local Authority District	127	34,282	3,451	37,860
 Number of complaints of Infestations Number of infestations found by inspection of premises :— 	25	234	74	333
(a) Rats (b) Mice	10 14	81 95	46 40	137 149
3. Number of treatments of premises by Local Authority's Rodent Operators	t 24	165	82	271
4. Number of premises treated by Occupiers		15		15

12. Atmospheric Pollution

Measurement of Pollution

For the purpose of estimating the degree of pollution of the atmosphere appliances are used to measure the amounts of soot, grit and smoke deposited and washed from the atmosphere by the rain also to test for the amount of sulphur gases. These appliances consist of three deposit gauges installed, one each at Sheriff Hill, at Shipcote and at the

Corporation Yard with also the sulphur candle appliance. The depositis and collections from these appliances are submitted to the Public Analyss for measurement and estimation and the results recorded are also supplied to the Fuel Research Section of the Department of Scientific and Industrial Research for the purposes of comparison and correlation with the records from other industrial areas throughout the country.

The results recorded by the three deposit gauges for this year shows that the average weight of soot and grit deposited per square mile is 2459 tons which is 8.26 per cent. higher than the average of the figures for the years 1951 to 1958.

The sulphur candle appliance, used to obtain an estimate of the degrees of concentration of sulphur gases in the atmosphere, is situated in the industrial area in the northern part of the town and the records show that in this respect also there is an increase in pollution above the average for the last 8 years equal to almost 3 per cent.

Deposit Gauges		Sulphur Candle				
Average Daposit per sq. mile		Estimation of Sulphur Gas				
		Mg. of S.C	0.3 per day			
Year	Tons	Year				
1951	260	1951	2.50			
1952	208	1952	2.34			
1953	200	1953	2.14			
1954	248	1954	2.39			
1955	224	1955	2.55			
1956	242	1956	2.55			
1957	207	1957	2.36			
1958	249	1958	2.56			
Average 229.75		Average				
Increase f	for 1958—8.26%	Increase for	or 1958—2.8%			

CLEAN AIR ACT, 1956

By means of an Order made by the Minister of Housing and Local Government designated as The Clean Air Act, 1956 (Appointed Day) Order, 1958, the remaining provisions of the Act, previously excepted, were brought into force on the 1st June, 1958 thus making the whole Act effective from that date. These provisions relate principally to industrial furnaces, railway engines and ships.

The opportunity thus afforded was taken advantage of, within the limited staff facilities of the department, for informal approaches before the Appointed Day in respect of certain industrial furnaces with good effect and in particular in respect of a brewery, with which difficulty had previously been experienced, where, with the assistance of the National Industrial Fuel Efficiency Service, a remedy applied proved successful in reducing smoke to within the limits provided for in the Act. In other cases attempts were being made also to achieve the same result and in general owners of furnaces appeared to be making efforts to meet their obligations under the Act.

Railway Engines

Within the Borough there are, in addition to 9 or 10 miles of railroads, one marshalling yard and two depots where engines are serviced at Greenesfield Works and Borough Gardens which, it is estimated, account for some 20,000 tons to 30,000 tons of coal consumed per annum resulting in a very considerable contribution to atmospheric pollution by smoke and grit discharged at low levels probably constituting something of the order of one fifth of the total pollution in the area.

Approach made to British Railways as to steps which could be taken to effect an improvement was sympathetically received and, although some amelioration was attempted, this very difficult question was still unresolved at the end of the year to be carried forward for further effort.

Shipping

No cases have arisen with respect to emissions from ships' furnaces. Such cases would, of course, be matters for the attention of the Tyne Port Authority as the appropriate authority under the Act.

Notice of intention to install new furnaces

Under Section 3 of the Act notices of intention to install new furnaces in industrial premises were received in respect of :—

1. A furnace and boiler for the purpose of steam raising in a dairy.

2. Two "Ideal" oil-fired boilers to be used for heating purposes in the test house of an engineering works.

Smoke Control Areas

No action was taken with respect to the establishment of Smoke Control Areas in the town. It should be noted, however, that in the rehousing of tenants of houses demolished in clearance areas in the central region of the town by the building of multi-storied flats on the cleared sites, the dwellings are equipped with smokeless appliances only for heating and cooking. By this means the elimination of the domestic smoke from the old houses and the prevention of smoke from the new houses makes a valuable contribution to the reduction of atmospheric pollution. Although this is not the procedure envisaged in the Clean Air Act the same purpose is achieved with same advantages.

Other Activities

The local authority continued to support the North-East Regional Advisory Committee of Local Authorities for Clean Air.

The work of the department in endeavouring to operate the Clean Air Act has again been seriously hampered by the shortage of staff for this and other purposes.

13. Rag Flock and other Filling Materials Act, 1951.

There are in the Borough the following premises licensed or registered under the Act as shown:—

Premises registered to use filling materials to wi	hich the	e Act	
applies			16
Premises licensed to manufacture Rag Flock	• •		NIL
			16

No samples of filling materials for analysis were taken owing top pressure of other duties upon the depleted staff of the Department.

Four visits were made to registered premises during the year.

14. Pet Animals Act, 1951.

There are four licensed pet shops in the Borough all of which have been periodically inspected and found to be maintained in compliance with the Act.

15. Burial Act, 1857

No action was necessary during the year.

16. Fertilisers and Feeding Stuffs Act, 1926

Two samples of feeding stuffs were taken formally and submitted too the Agricultural Analyst as check samples at the request of another authority. The results of the analyses were satisfactory.

G. DISEASES OF ANIMALS ACT, 1950

Activities under this Act during the year related mainly to the lives stock market at Redheugh Bridge Road and to the Keeping of pigs mostly, by small pig keepers.

Live Stock Markets

Statement of number of animals which passed through Messrs... Maughan's Auction Mart, Tyne Road East, which is an official certification centre.

		Fat Stock	Store
		for Slaughter	Stock
Cattle		12,379	395
Sheep		14,307	
Calves		211	24
Pigs		9,166	4,926
Dairy Cows		· —	
Horses	• •		235
		36,063	5,580

92 sales were held and an inspector attended all sales for the purposes of issuing movement licences and the general supervision of cleansing and disinfection. The numbers of animals passing through the mart showed as slight decrease in fat stock and a considerable increase in store stock, especially pigs.

Pedigree Pig Sales

No sale of Pedigree Pigs on behalf of the North of England Pedigree Pig Breeders' Association was held at Maughan's Mart during the year.

Irish Animals Order—Authorised Market

Three sales of freshly landed Irish Cattle took place during the year involving 391 animals.

Transit of Animals Order

Cleansing and disinfection of road vehicles was supervised at Messrs. Maughan's Washing Dock, Redheugh Bridge Road at which 1,625 vehicles were dealt with.

Regulation of Movement of Swine Order, 1950

Movements of animals under this Order were as follows:—

•	No. of	No. of
	Licences	Swine
Movement of Swine from Maughan's Auction Mart to premises outside the Borough	1,205	13,974
Movement of Swine from Maughan's Auction Mart to premises within the Borough	18	118
Movement of Swine to premises within the Borough received and checked	97	3,019
Movement of Swine into Maughan's Auction Mart as Collecting Centre for Animals for slaughter were received and checked	1	11

Regular inspections were carried out to see that the conditions of licences were being observed. No contraventions of the Order were met with during the year.

Sale of Poultry

Nineteen licences were granted under the Live Poultry (Restrictions) Order, 1957 to Messrs. T. and I. Maughan and Company, Limited to hold sales of fat poultry at their market in Redheugh Bridge Road.

3,225 Poultry were entered and sold.

SWINE FEVER

The Borough was free from any outbreak of Swine Fever during the year.

ANTHRAX

In January the carcase of a heifer which had died of anthrax was discovered at Dobson's Knackers Yard. The carcase and all other contaminated articles were destroyed by incineration on the premises upon completion of which the entire premises were thoroughly cleansed and disinfected before resumption of normal activities.

The Medical Officer of Health was notified of the occurrence at the outset to enable him to take the necessary action with respect to a slaughter man who had handled the carcase.

PART VI

INSPECTION AND SUPERVISION OF FOOD

MILK AND DAIRIES

Milk Supply

The last dairy farm in the Borough having ceased to produce milk for sale during 1957, the milk supply to the inhabitants became entirely dependant upon outside sources. These consist of the Milk Marketing: Board supplying bottled milk to some dairymen, Dried Milk Products: Limited supplying bulk raw milk to pasteurisers, milk supplied by farmers: to the pasteurisers and producer-retailers and distributors supplying: from premises outside the Borough.

By virtue of the Milk (Special Designation) Specified Areas) Order, 1953 no raw undesignated milk may be sold in the area and, in fact, very little Tuberculin Tested raw milk is sold as such, the dairyman mostly preferring to pasteurise such milk to prolong keeping quality.

Samples of bottled milk from the various dairies having been shown by analysis over the past few years to be well up to the required standard, it was decided to direct more attention to the sampling of the farm milk arriving at the dairies.

This has revealed a few supplies of rather poor quality milk but with the institution of the Milk Marketing Board Scheme (Oct., 1957) whereby farmers are paid according to the fat content, the quality is found to be improving.

The bacteriological standard of the milk supply has also been well maintained and heat treatment has been carried out, in the main, satisfactorily.

It may be stated with some assurance that the milk supply need cause no anxiety, although continued supervision will be necessary to maintain this position.

Milk Retailers

Distribution of milk in the Borough is carried out by :—

Producer Retailers from outside the Borough	 3
Retailers distributing from premises outside the Borough	 8
Retailers distributing from premises within the Borough	 10
Retailers (Shops)	 374
	395

Milk (Special Designation) (Raw Milk) Regulations, 1949

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949

The following tables give the various grades for which 553 licences were issued:—

Tuberculin Tested Dealer's licences	• •	47 10
Pasteurised and Sterilised Dealers Pasteurisers Licences	• •	3 104 376 9 4
		553

Quality and Purity of Milk

Of sixty samples (formal and informal) taken for chemical analyses under the Food and Drugs Act the results of the analyses showed that seven were slightly deficient in milk solids non-fat, two slightly deficient in milk fat and non-fatty solids. Check samples of the nine slightly deficient milks were found to be satisfactory and the remaining sample is under investigation. In the cases of eight of the samples the presence of added water was not confirmed by the freezing test. Details of these samples are shown in the table of Food Sampling.

The results of the samples of milk submitted for the various bacteriological tests during the year 1958 show the maintenance of the high standard of the previous years.

The efficiency of modern pasteurisation plant is indicated by the fact sthat only 1.6 per cent. of the samples failed the phosphatase test and only 3.5 per cent. failed the methylene blue test.

The following summary shows the total number of samples taken during the year and submitted for the prescribed tests under the Milk (Special Designation) (Raw Milk) Regulations, 1949, the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 and the Heat Treated Milk (Ministry of Health Circular 31/44).

1.	Methylene Blue Test	 195
2.	Phosphatase Test	 185
3.	Tuberculosis Biological Test	 3
4.	Turbidity Test	 5
		-
		388

RESULT OF TESTS

Class of Milk	Appropriate Test	No. Exam- ined		No. Unsatis- factory	No. Invali- dated	Percent- age Satis- factory
2Pasteurised	Methylene Blue Phosphatase	124 124	117 119	4 2	3 3	96.7% 98.35%
School Supplies (Pasteurised)	Methylene Blue Phosphatase	30 30	28 28		2 2	100.0% 100.0%
Tuberculin Tested Pasteurised	Methylene Blue Phosphatase	31 31	29 29	1 1	1 1	96.66% 96.66%
Sterilised	Turbidity	5	5			100.0%
Fuberculin Tested	Methylene Blue Animal Inoculation	10 n 3	8 3	2	9/A	80.0% 100.0%
		388	366	10	12	97.0%

Milk Supply to Schools

Thirty samples of milk supplied to schools satisfied the phosphatases test, and the methylene blue test.

Ice Cream

Bacteriological Examination

19 samples of ice cream were submitted for the methylene blue: grading tests with the following results:—

Grade 1. Grade 2. Grade 3. Grade 4.	• •	• •	5 } 6 } 2 }	Satisfactory Unsatisfactory
			19	

57.9 per cent. of the samples were satisfactory as compared with 56.5 per cent. in 1957.

The unsatisfactory samples were dealt with in the following manner:—

- (a) Four from manufacturers in the Borough by check sampling; either during and/or after manufacture.
- (b) Four from manufacturers outside the Borough by notifying; the local authority concerned of the results of the samples.

Ice Cream Premises

Premises registered for the manufacture of ice cream at	
beginning of year	9
Premises registered for sale of ice cream at beginning of year	305
Premises added to register for sale of ice cream during the	
year	22
Premises removed from register for sale of ice cream during	
the year	11
Total number of premises registered for sale of ice cream	
at end of 1958	316

Inspections of these premises were carried out so far as possible.

FOOD AND DRUGS ACT, 1955 INSPECTION OF MEAT AND OTHER FOODS

Slaughterhouses

At the commencement of the year there were no slaughterhouses in the Borough but during the month of September a newly constructed slaughterhouse was licensed for the slaughter of pigs and sheep. These premises, situated in the Saltmeadows area were built and equipped in compliance with the recommended requirements of the proposed Slaughterhouse (Hygienic Construction) Regulations as set out in the Ministry of Agriculture, Fisheries and Food White Paper Cmnd.2433 dated August 1957.

Slaughtering started on the 8th September and initial difficulties were soon surmounted. Up to the end of the year 3,205 pigs and 140 sheep had been killed. In spite of serious shortage of staff 100 per cent. of pig carcases and rather less than 100 per cent. of sheep carcases were inspected.

As the result of inspection the following carcases and organs were condemned during this period of rather less than 4 months.

Sheep carcases and organ	ns	 	65
Pig carcases and organs		 	10
Pigs Heads		 	104
Pigs Lungs		 	537
Pigs Livers		 	138
Pigs Plucks		 	104
Pigs Legs		 	3
Pigs Hindquarters		 	2
Sheep Plucks		 	9

The premises were kept under close supervision and conducted in a satisfactory manner, any requests for improvements or matters requiring tattention were readily responded to by the licencee who received every possible assistance from the inspectors.

It is anticipated that the Slaughterhouse (Hygiene) Regulations 1958 and the Slaughter of Animals (Prevention of Cruelty) Regulations, 1958, coming into force on the 1st January, 1959, will also be readily observed with the desired effect.

Inspection of Unsound Food

Difficulties experienced during 1957, when it was found impossible to cope with the requests of food traders for inspection of food withdrawn from sale and for the issue of certificates in respect thereof, owing to depleted staff, led to the adoption by the Borough Council in October, 1957 of a resolution under Section 98 of the Food and Drugs Act, 1955 authorising the inspection of such foodstuffs and the charging of an appropriate fee for that service also an additional fee for the issue of multiple certificates.

The effect of this procedure became apparent during 1958 when the demands for this service were, by this means, brought to manageable proportions. The larger firms accepted the procedure and readily co-operated whilst the insistent demands of individual shopkeepers ceased, goods in possession of the latter being returned to their suppliers, these being usually very small quantities.

The following table shows the amount of the various classes of foodstuffs dealt with.

Meat Bacon and Ham Tinned Goods Preserves	•••	• •	lbs. 839 367 ¹ / ₄ 6,376 ¹ / ₄
	Total	• •	7,584½

Total for 1958 Tons. 3 : Cwts. 7 : Qtrs. 2 : lbs. $24\frac{1}{2}$ Tons. 8 : Cwts. 8 : Qtrs. 1 : lbs. 21

The result of working Section 98 of the Act for the first year is that:

- 1. requests for inspection have been reduced to one quarter.
- 2. certificates issued have been reduced in number to one third. and
- 3. the quantity of goods inspected has been reduced to less than half of the average per annum for several previous years.

The annual revenue accruing from the charges amounts to the modest sum of £38 15s. 0d. which is about half the cost of the employment of one inspector for one month.

Offences under the Food and Drugs Act, 1955

Legal proceedings authorised to be taken were in respect of :—

- 1. The sale of a packet of biscuits containing insects.
 - The defendant pleaded not guilty but the charge was found proved and a fine of £5 and costs imposed.
- 2. Milk, in course of delivery by a farmer to a dairy, found to be 13.3 per cent. deficient in Milk fat and 26.8 per cent. deficient in solids not fat, added water 25.8 per cent.

Defendant found guilty and fined £15 and £6 13s. 0d. costs.

- 3. A bottle of milk containing a partly smoked cigarette delivered to a consumer.

 The defendant pleaded not guilty and the case was dismissed.
- 4. The sale of a mouldy meat pie.

The defendants pleaded guilty and were fined £5 and £5 5s. 0d. costs.

Food Premises

(1) The following summary shows the number of food premises in the town showing the principal trade carried on in each case, but it should be noted that in many cases other types of commodities are dealt in besides the principal trade, for example many grocers, confectioners, general dealers and dairies also sell ice cream—mostly pre-packed.

114
51
72
26
84
115
366
141
13
5
987

(2) Food premises registered under Section 16 of the Food and Drugs Act, 1955.

Ice Cream				316
Butchers				36
Pork Butchers		• •		3
Bakeries				3
Pie Manufactu	rers			9
Preserved Mea	t Ma	nufactur	er	1
				368

(3) There are 5 dairies in the town registered under the Milk and Dairies Regulations, 1949-1954.

(4) Inspection of food premises.

For the purposes of inspection and registration of food premises 696 visits were made, details of which are shown in the Summary of Inspectors' Visits and Inspections in Part F. of this report.

Every effort was made, within the capacity of the limited staff available, to maintain the standard of hygiene in food premises previously achieved under the Food and Drugs Act, 1938 and to further improve thereon by means of the Food Hygiene Regulations, 1955 but there remains much to be done in this sphere.

Again it is satisfactory to note that there has been a further reduction in food poisoning incidences, there having been 14 outbreaks affecting 20 persons as compared with 18 outbreaks affecting 22 persons during 1957 and 30 outbreaks and 31 persons for 1956 from which it is reasonable to conclude that, despite the difficulties of maintaining adequate supervision, there has been no serious deterioration in food hygiene standards and this reflects to the credit of food traders in general.

Food Sampling

104 samples of various foods were taken and submitted for analysis by the Public Analyst of which 91 were reported as genuine and 13 as irregular.

The foods sampled were :-

Samples	1	No Samį	. of ples	Samples	No Sam	o. of ples
FORMAL Milk	• •	• •	5			
Informal						
Butter		• •	2	Instant Potato		1
Bacon Skin and Fat			1	Ice Cream		4
Beef Sausage			2	Jam		3
Bitter Lemon			1	Milk		55
Bread Crumbs	• •		1	Margarine		2
Cheese Spread			1	Malt Vinegar		2
Cooking Fat			1	Mincemeat		4
Condensed Milk			1	Pease Pudding		1
Curry Powder			1	Potatoes	• •	7
Fish Cakes	• •		4	Sterilised Cream (Tinned	d)	1
Ginger Cordial (Nor	Alcol	nolic)	1	Salmon Spread		1
				Stewed Steak (Tinned)		1
				Tongue Paste		1

Seven samples were deficient in milk solids, non-fat to the extent of 1.5%, 2.7%, 2.8%, 1.0%, 3.6%, 0.5%, 3.2%. Freezing point tests did not t confirm presence of added water.

Two samples from one supply were deficient in fat to the extent of 6.6% and 16.6%. Formal check samples were satisfactory (January, 1959).

One sample deficient in fat to the extent of 16.6% and non-fatty solids to extent 7.0%. Presence of added water not confirmed by freezing point test. Formal check samples to be taken.

Sample of bacon skin and fat was submitted for suspected contamination. Analyst reported contamination by copper and advised removal of contaminated parts.

Sample of bread crumbs was submitted for presence of mould spores. Analyst reported presence of mould after incubation for 48 hours at 37 °C.

Sample of margarine submitted for rancidity test. Rancidity confirmed.

J. P. LAVENDER, CHIEF PUBLIC HEALTH INSPECTOR.

ANALYSIS OF DEATHS ACCORDING TO CAUSES, AGE AND SEX DURING 1958

	Total	Males	Females	0—1 Yrs.	1—2 Yrs.	2—5 Yrs.	5—15 Yrs.	—25 Yrs.	25—45 Yrs.	45—65 Yrs.	65—75 Yrs.	75 Yrs. & Over	Total Deaths in Public Institutions	Transf Dea	
Certified	1274 20		583 7		_1	_5	_10 _	_4	47 1	338	338 7	471 9	_	191 5	260 3
1. Tuberculosis, Respiratory 2. Tuberculosis, Other 3. Syphilitic Disease 4. Diphtheria 5. Whooping Cough 6. Meningococcal Infections 7. Acute Pollomyelitis 8. Measles 9. Other Infective and Parasitic Diseases 9. Malignant Neoplasm, Stomach 1. Malignant Neoplasm, Lung, Bronchus 2. Malignant Neoplasm, Uterus 3. Malignant Neoplasm, Uterus 4. Other Malig, and Lymphatic Neoplasms 5. Leukaemia, Aleukaemia 6. Diabetes 7. Vascular Lesions of Nervous System 8. Coronary Disease, Angina 9. Hypertension with Heart Disease 10. Other Circulatory Disease 11. Other Circulatory Disease 12. Influenza 13. Pneumonia 14. Broncho Pneumonia 15. Bronchitis 16. Other Diseases of Respiratory System 17. Ulcer of Stomach, Duodenum 18. Gastritis, Enteritis 19. Diarrhoea 10. Nephritis, Nephrosis 11. Hyperplasia of Prostate 12. Pregnancy, Childbirth, Abortion 13. Congenital Malformations 14. Premature Birth 15. Other Defined and Illdefined Diseases 16. Motor Vehicle Accidents 17. All Other Accidents 18. Suicide 19. Homicide and Operations of War	1588 180 31 191 65 2 13 14 49 97 16 11 19 19 10 11 11 11 11 11 11 11 11 11 11 11 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 2 75 73 177 1111 47 2 6 27 34 4 5 5 5 10 11 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		8		1 1 2 2 5 10 11 2 2 5 5 10 10 10 10 10 10 10 10 10 10 10 10 10	- -		5 8 9	1 5 6 —	6 5	4 101 81 15 74 39 1 9 37 46 7 18 3 — 3 6 1 4 23 65 23 65 23 8 —	3 1 	6 — — — — — — — — — — — — — — — — — — —
	129	4 704	1 59	0 6	U	1	1	1 4	40	341	343	400	1 /31	150	203





